## Center for the Study of Women, Gender & Sexuality NORTHERN ILLINOIS UNIVERSITY

Request for Independent Study in Women's & Gender Studies - WGST 639

## (THIS FORM MUST BE FILLED OUT BEFORE STUDENT REGISTERS FOR WGST 639)

<u>NOTE</u>: The Director of the Center for the Study of Women, Gender & Sexuality must approve this sheet before you can get a permit and register for the course. Complete proposals must be submitted for the program director's approval a minimum of two weeks before classes begin. Once you have a permit, regular registration drop and add deadlines apply. <u>PLEASE PLAN AHEAD</u>.

Student's Name	Z-id #
Email	Phone ( )
Address	
Major	Cumulative GPA
Number of Hours Completed Toward Concen	tration Expected Graduation Date
Courses Completed for the Concentration:	
WGST 620 WGST 630	
Semester Independent Study is Desired:	
Please <b>attach</b> a minimum 1 page typed descri how and on what you will be graded. (Append	ption, including a reading list and an explanation of l reading list.)
Signature of Student	Date
Signature of Faculty Supervisor	Date
Signature of Center Director	Date
Signature of Center Director	Date

Original in Center for the Study of Women, Gender & Sexuality Copy to Faculty Supervisor Copy to Student