

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

Request for Independent Study in Women's & Studies – WGST 439

(THIS FORM MUST BE FILLED OUT BEFORE STUDENT REGISTERS FOR WGST 439)

NOTE: 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. PLEASE PLAN AHEAD.

Student's Name _____ Z-id # _____

Email _____ Phone () _____

Address _____

Major _____ Cumulative GPA _____

Number of Hours Completed Toward Minor or Certificate _____

Courses Completed for the Concentration:

WGST 101 _____ WGST 201 _____ WGST 202 _____ WGST 432 _____

OTHER (list) _____

Semester Independent Study is Desired: _____ Expected Graduation Date _____

Please **attach** a minimum 1 page typed description, including a reading list and an explanation of how and on what you will be graded. (Append reading list.)

Signature of Student _____ Date _____

Signature of Faculty Supervisor _____ Date _____

Signature of Center Director _____ Date _____

Original in Center for the Study of Women, Gender & Sexuality

Copy to Faculty Supervisor

Copy to Student