Please complete this form, provide your electronic signature, and obtain the electronic signature of your professor, and then email the form to the MENAS Graduate Coordinator. This form is for departmental records and is used to assign a grade at the end of the semester.

Please note that the Plan of Study form and the Committee Appointment form must be approved on GradPath before an MA student is allowed to register for MENA 910: Thesis units.

Please note that the Plan of Study form and the Comprehensive Exam Committee Appointment form must be approved on GradPath before a PhD student is allowed to register for MENA 920: Dissertation units.

Last Name: ________________________________  Semester: _________  Year: ______
First Name: ________________________________  Course Prefix (ARB/MENA/TURK): __________________
Student ID: ________________________________  Course #: __________________
Email: ____________________________________  Number of Units: ____________

Note: The University of Arizona Board of Regents has set a standard of 45 hours of work for each unit of credit awarded.

Description of Project:

Guidelines for Independent Study
1. The student should have a specific proposal or project in mind when requesting an Independent Study course.
2. The enrollment fee for Independent Study credit is calculated at the same rate as for other credit courses.
3. Students should enroll within the first three weeks of the Fall and Spring Semesters or immediately after the beginning of Winter or Summer Sessions. Students must complete the required 45 hours of course work per credit unit before the last day of the term. The last day to register for Independent Study in Fall and Spring Semesters without incurring a late charge is the same as for all other courses; see http://www.bursar.arizona.edu/students/fees/census and http://www.bursar.arizona.edu/students/fees/late_charge.asp.

Signatures (required):

Student: ________________________________  Date: __________________
Professor: ________________________________  Date: __________________
Director of Graduate Studies: __________________________  Date: __________________