

School of Computing

University of Georgia

Office Use Only:	
Completed _____	Date _____

INDEPENDENT STUDY/INTERNSHIP FORM

YEAR: 20\_\_

STUDENT PRINTED FULL NAME: \_\_\_\_\_

UGA ID# (9 DIGITS): \_\_\_\_\_

SEMESTER:  Fall  Spring  Summer

CSCI CLASS:

CSCI 4950 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 4960 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 4960R CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 6950 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 5007 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 7000 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 7005 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 7007 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 7200 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 7300 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 8990 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 9000 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 9005 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

CSCI 9300 CRN: \_\_\_\_\_ CREDIT HOURS: \_\_\_\_\_

Instructions: Student is to complete this form for directed study, internship, MS CSCI NT project, masters or doctoral research, masters thesis, research seminar, and/or doctoral dissertation course access. The form is to be emailed to instructor of the course listed, and a separate form is required for each instructor. The form is to be finally submitted to School of Computing staff for POD course access. Please submit form prior to registration for the term. This form is valid until end of drop/add period.

Brief description of project undertaking for grade:

Student Signature / Date  
\_\_\_\_\_

\_\_\_\_\_  
Advisor / Major Professor Signature / Date