

# 2023 UCI SUMMER SESSION

## REQUEST FOR INDEPENDENT STUDY

### INSTRUCTIONS:

1. Student obtains this form and fills it out with instructor.\*
  2. Student submits original form to the Department and/or Associate Dean for approval.
  3. Student must submit **this original approved form**, an **enrollment form**, and **payment** to the Summer Session Office prior to deadlines. (Incomplete forms will not be accepted.)
- \* *Must complete in ink. To ensure the integrity of the form and authorizing signatures, forms with alterations such as white-outs, cross-outs, or scanned signatures will not be accepted.*

| FOR OFFICE USE ONLY          |
|------------------------------|
| LAST, F.I.:                  |
| SESSION: _____, _____, _____ |
| SECTION: _____, _____, _____ |
| CODE: _____, _____, _____    |
| COURSE TYPE:                 |
| INSTRUCTOR ID:               |

### STUDENT INFORMATION: TO BE COMPLETED BY STUDENT

STUDENT NAME: Anteater, Peter  
(LAST, FIRST MIDDLE)

STUDENT EMAIL: panteater@uci.edu

UCI OR SUMMER SESSION ID #: 87654321

### COURSE INFORMATION: TO BE COMPLETED BY FACULTY SPONSOR AND STUDENT

All information MUST be provided accurately and in full, including units. Refer to WebSOC or course catalogue for previously approved titles/units.

DEPARTMENT & NUMBER: ENGR 291  
(i.e. ANTHRO 199)

TITLE (UP TO 19 CHARACTERS):  
(AS SHOWN ON TRANSCRIPT)

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| INTERNSHIP |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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SESSION & UNITS:       SESSION 1: 1 UNITS                       SESSION 2: 1 UNITS

10-WK SESSION: \_\_\_\_\_ UNITS

FACULTY SPONSOR: JANE DOE  
PRINT FULL NAME

FACULTY UCI.netID: JDOE

INSTRUCTOR NOTES:

- \* GRADE SUBMISSION IS DONE ONLINE WITH YOUR UCI.netID USING WebGrades.
- \* ALL ACADEMIC CORRESPONDENCE WILL BE MADE TO YOUR UCI EMAIL ACCOUNT.
- \* THERE IS NO REMUNERATION FOR INDEPENDENT STUDY COURSES.

### APPROVAL: TO BE COMPLETED BY FACULTY AND DEPARTMENT AND/OR ASSOCIATE DEAN

FACULTY SPONSOR: JANE DOE  
SIGNATURE

DEPT DEAN OR CHAIR: JOHN DOE  
SIGNATURE

JOHN DOE, DEPT. CHAIR  
PRINT NAME & TITLE

**MAKE A COPY OF THIS FORM FOR YOUR RECORDS**  
**SUBMIT THIS FORM WITH A SEPARATE ENROLLMENT FORM**