Advanced Independent Reading
Course Number: Geosciences 999

Name of Student _______________________________ ID Number _______________________________

UWM Email Address ________________________________________________________________

Degree Program ___________________________ Cumulative Grade Point Average _______________

Semester and Year Enrolled _______________________ Credits to be Earned _________________

Supervising Professor _____________________________Section Number (Inst #) _______________

Study Proposal (Describe Fully - Attach additional sheet if necessary) - Include the following information: General statement of subject matter; description of student's activities - read books (list titles), consult journals, conduct interviews, perform experiments, etc.; description of how student will be evaluated --oral reports, exams, papers, etc.

____________________________________
Student                                   Date

____________________________________
Supervising Professor              Date

____________________________________
Copies to: Student
            Supervising Professor
            Geosciences Graduate Advisor
            Geosciences Office
            Geosciences Department Chairperson

Student                                     Date

Supervising Professor              Date

Graduate Advisor                      Date

Department Chairperson                Date

Geosciences Graduate Advanced Independent Reading Form
11/1/2019