

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

Graduate Advisor Date

Department Chairperson Date