GRADUATE INDEPENDENT STUDY FORM (PSC 670)
Department of Political Science, State University of New York at Buffalo

Student’s Name: ____________________________  Semester & Year: ____________________________
Instructor: ____________________________  # Credit Hours: ____________________________

Description of Course Content:

Reason for course being offered as an independent study or reading course:

Bibliography and other work completed for course (attach additional sheets if necessary):

Method of Evaluation:

Signatures:

__________________________________________  ________________________________
Student  Faculty Instructor

__________________________________________
Director of Graduate Studies