

Petition to enroll in IEOR 299 (Individual Study or Research Course)

Instructions:

- Fill out form,
- Obtain signature from faculty supervising the independent study,
- Include number of units,
- Return to: Student Advisor Officer at 4145 Etcheverry Hall, IEOR,
- The Course Control Number (CCN) will be given to you.

Name:		SID:	Major:
Email:			Date Entered:
Current Degree Goal:		Passed Entrance:	Passed Qualifying Exam:
BS degree from:		In	Date:
MS degree from:		In	Date:
Advancement to Candidacy MS/ENG:			Advancement to Candidacy PhD:
<i>Appointment:</i> GSI:	%	Course #:	Instructor:
GSR:	%	Funding:	Research Advisor:
Fellowship:			
Campus Address:			Campus Phone:
<hr style="border-top: 1px dashed black;"/>			
Proposed Program	Fall 20	Spring 20	Total Units:
Course #: 1.	2.	3.	4.

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Name of supervising faculty member: _____

Semester:	<input type="checkbox"/> Fall 20 <input type="checkbox"/> Spring 20	Units: _____
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CCN _____

Supervising Faculty Signature: _____ **Student Signature:** _____ **Date:** _____