

**ASTE 6900/7900 (1-4 credits) and ASTE/FCSE 6950 (1-6 credits)**

**Independent Study/Internship Coursework Approval Form**

Please complete this form and submit to the graduate advisor, Debra Spielmaker,  
(debra.spielmaker@usu.edu).

Name: \_\_\_\_\_ A#: \_\_\_\_\_

Semester: \_\_\_\_\_ Year: \_\_\_\_\_

Credit(s) Desired: \_\_\_\_\_ Estimate of Project Hours (50 hours/credit): \_\_\_\_\_

Please attach a file (MSWord or PDF) that includes the following:

1. Proposed project/program title.
2. A brief description of the proposed project or program. If this is an Independent Study, discuss the projects need or significance. If you are interning in a particular program describe the program and what is to be knowledge, skill or programming will be accomplished.
3. An outline of the procedures you will follow in pursuing this project. Include specific objectives, activities, a timeline, and if applicable, your evaluation for this project or experience.

As the student taking this course, I recognize and concur that the assignment will be completed by myself with the assistance and to satisfaction of the faculty chair/supervisor, whose signature appears below, no later than \_\_\_\_\_ (date).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Committee Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Other/Sponsor (optional): \_\_\_\_\_ Date: \_\_\_\_\_

**Completion of Contract Verification – to be completed by the faculty supervisor**

Date Completed: \_\_\_\_\_ Grade Earned: \_\_\_\_\_

Faculty Supervisor Signature: \_\_\_\_\_

Comments: