

APPLICATION FOR INDEPENDENT STUDY AND RESEARCH UNITS

The last day to submit this form in Fall and Spring is the Friday of the third week of instruction. The last day to submit this form in Summer is the Add Course deadline for Session C.

Email this form to your major advisor and please allow up to 5 business days to process.

If your application is approved, you will be directly added to the units and they will appear on your CalCentral.

Name: _____ SID#: _____

Signature: _____ Cumulative GPA: _____

Email: _____ Phone #: _____

Major: _____ Semester & Year: _____

- Meet with faculty to determine project, requirements, and unit enrollment
- Obtain appropriate faculty signature(s)
- Bring completed form to the Rausser College Student Affairs Office to be enrolled or obtain permission number to enroll

Check One Sponsoring Department:

- | | |
|---|---|
| <input type="checkbox"/> EEP (Environmental Economics & Policy) | <input type="checkbox"/> NST (Nutritional Science & Toxicology) |
| <input type="checkbox"/> ERG (Energy & Resources Group) | <input type="checkbox"/> PMB (Plant & Microbial Biology) |
| <input type="checkbox"/> ESPM (Environmental Science, Policy, & Mgmt) | |

Check One Option:

- ☐ I am participating in a research project or independent study project with a Rausser College faculty member.
- ☐ I am approved to enroll in units as a DeCal facilitator (98 or 198 Class Number: _____)

Units: _____ (1-4 units, P/NP only)

(1 unit = 3 hours of work per week during fall and spring or 45 hours for the entire summer) No more than 4 units of independent study can be taken per semester. No more than 16 units of independent study (98/198, 99/199) can be used toward degree.

Write a brief summary of your proposed research project or research internship. If you are accepted to a SPUR project, please fill out the SPUR research form instead. If you are a DeCal facilitator, describe your responsibilities as a facilitator. Attach additional sheet if necessary.

Sponsoring Department Faculty Member:

Print Name: _____ Signature: _____ Date: _____

Supervising Researcher (If different from sponsoring faculty member):

Print Name: _____ Signature: _____ Date: _____