



T E X A S
Wesleyan
 UNIVERSITY

Please check one:

Conference Course
(for courses not currently offered but listed in catalog)—extra course fee applies)

Independent Study
(for courses not listed in catalog, must be 3000 or 4000 level)

Please complete form, obtain all required signatures and return to the Office of Student Records.

Date _____

Student Name _____

Student ID # _____

Semester/Year _____

Subject _____

Independent Study Course Number _____

The Independent Study course number listed above will substitute for the following course: _____

Conference course number _____

Student's Name

Student's Signature

Instructor's Name

Instructor's Signature

Dean's Name

Dean's Signature

Registrar's Name

Registrar's Signature

This form must be presented at the time of registration with syllabus attached.