

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

**PSY 395-001/002(circle one)  
Independent Work in Psychology**

Student's Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Grade Point Average (GPA): Overall: \_\_\_\_\_ Classification: Fr \_\_\_\_ So \_\_\_\_  
Psychology: \_\_\_\_\_ Jr \_\_\_\_ Sr \_\_\_\_

Subject of Independent Study: \_\_\_\_\_

Place Where Work Will Be Done: \_\_\_\_\_

Basis for Evaluation & Grade: \_\_\_\_\_

Daily Log or Journal \_\_\_\_\_ Formal Term Paper \_\_\_\_\_

Literature Review \_\_\_\_\_ Book Reports \_\_\_\_\_

Supervisor Reports \_\_\_\_\_ Experimental Data \_\_\_\_\_

Miscellaneous: \_\_\_\_\_

Date Work is Due to be Completed: \_\_\_\_\_

Time & Place of Meetings with Instructor: \_\_\_\_\_

Number of Hours Enrolled: \_\_\_\_\_ Number of Hours Required per Week: \_\_\_\_\_

Student's Signature: \_\_\_\_\_

Instructor's Name & Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

*Please sign three copies (one for the student, one for the Instructor, and one for the Department).*