REQUEST FOR NON-CLASSROOM CREDITS

NAME:			Student ID#:				
EMESTER & YEAR	SECTION NUMBER (LEAVE BLANK)	SUBJECT AREA	COURS	E NUMBER	COURSE TITLE	CREDITS	
This card is	to be used for course	es listed in the colleg	ge catalog v	with the follo	owing numbers:		
48	4 Environmental Stu	idies Field	571	Independer	nt Research Problem	1S	
	Experiences & Int	ernship	572	Thesis I			
48	5 Independent Study	/	573	Thesis II			

577 586 Independent Study Field Experiences & Internship

Field Experiences

486

INSTRUCTIONS

- 1. Obtain the following signatures: a. Advisor, b. Instructor, c. Chairperson. **NOTE:** The Dean's signature is required if the Instructor's supervision of the non-classroom activity results in overload pay for the academic year.
- 2. Submit the card to the Student Enrollment Center.
- 3. **NOTE:** This card must be submitted to the Student Enrollment Center prior to the beginning of the sixth day of classes in a semester or session. Approval may not be granted if submitted after the fifth day of classes.

Signature of Student	Date	Signature of Dean	Date Date	
Signature of Instructor	Date	Signature of Chairperson		
Instructor Print Your Name		Signature of Advisor	Date	