

*** CU-Denver Special Processing Form ***

*** Student Section ***

James Amidei 107092335 CLAS Physics Fall 2023
Student Name Student Number School/College Major Term/year

PHYS 3880 900 1 Directed Research
Subject. Abbr. Course Number Section Number Credit Hours

Student Signature James Amidei Date: 08/16/2023 Course Title (24 spaces each line)

***** Independent Study/Thesis Completion Contract *****

Consult your school or college for limits and restrictions.

1. Briefly describe the project:
2. What performance/accomplishments will be expected of the student?
3. How many hours per week do you expect the student to devote to the project? _____
4. How many hours per week/month will the student and faculty meet _____

***** Instructor and Dean's Approval *****

❖Instructor's approval is required for all transactions on this form. ❖Dean's approval is required for **Independent Study** courses, **Thesis** courses and late adds.

Instructor's Signature _____ Date: _____

Instructor's Name - please print _____

Dean's Signature _____ Date: _____

☐ Student is approved for a late add.

Students/Academic Units - Be sure to make a copy of the completed form prior to submitting to the Records Office.

Records use only:
Date _____
Clrk _____
RR-06/95