

**UNIVERSITY OF ILLINOIS
AT URBANA-CHAMPAIGN**

**Department of Geography and
Geographic Information Science**

255 Computing Applications Bldg, MC-150
605 East Springfield Avenue
Champaign, IL 61820



GEOGRAPHY/GIS 390

PLAN OF STUDY AGREEMENT

Student name _____ UIN: _____

Instructor _____

Semester, Year _____, 20____ Number of credits _____

Title of Individual Study _____

Brief description of planned activities :

Basis for grade:

Student Signature _____ Date _____

Instructor Signature _____ Date _____