

APPLICATION FORM FOR INSIGNIS SENIOR PROJECT

[Note: See the guidelines in the Insignis Program Student Handbook before filing out this form. This form must be approved by the Insignis Program Review board *before* you fill out an independent study contract with a faculty member.]

NAME: _____

MAJOR: 1. _____ 2. _____ **MINOR:** _____

TITLE OF PROPOSED PROJECT:

DESCRIPTION OF PROJECT:

Project to be completed by : _____ (date)

Supervising faculty member's name and department: _____

Supervising faculty member's signature: _____

Approved by Insignis Program Review Board: _____

After you receive word that this project has been approved for an Insignis Senior Project, fill out the standard Independent Study contract from the Registrar's office, using the number IN 398, and give one copy, with appropriate signatures, to the Insignis program Director for your file.

I have read the guidelines for the Insignis Senior Project and I understand the requirements of the project:

Student's Signature: _____