

Department of Languages, Literatures and Cultures
 UNIVERSITY OF DELAWARE
 Special Problem/Independent Study
TITLING FORM

Student Name: _____
 (PRINT CLEARLY) (Last) (First) (M.I.)

Student UD ID #: _____ Student Email: _____ Term: _____

Course:

4 Letter Alpha Code					Course #			Cr. Hrs.

Course Title:

Title of course not to exceed the blocks.

Once student is registered for an Independent course, a webform email is generated to the student. The student completes the top portion of the webform, then forwards it to the faculty overseeing the course. The faculty member completes the webform and routes it to the Center for Educational Effectiveness if DLE credit is desired and/or to the Honors Program if Honors credit is desired. After required approvals are submitted, the form is returned to the student to confirm that he or she is in agreement with the responsibilities indicated. Once student has indicated agreement by approving the final version, copies are sent to the Dean's Office, Registrar's Office and all of the approvers for record keeping.

Completing this form does NOT constitute course registration.
 This form is for Languages, Literatures and Cultures files.

INSTRUCTOR'S APPROVAL

Instructor's Signature

Date

Instructor's Name: (Please Print) _____