

Independent Study Application

Full Name:

Graduation Year:

Email:

Id Number:

Description of Activity: (1 paragraph description & what will be learned)

Documentation of Activity, how it will be measured:

Location of Class:

Date & Time of Class:

Total Hours of Participation: _____

12 hours = 1 PE credit

24 hours = 2 PE credits

Name of Instructor:

Contact Information of Instructor:

Address:

Phone:

Email:

Return proposal and document to Deb Charamella (dcharame@brynmaur.edu).