Permission of Instructor Course Action Form
EXST 7999 Independent Study

Student: ____________________________________________________________
(Print your name, last name first.)

The above student has registered for _______ hours of EXST 7999 for the __________________ semester and has named you as the supervising instructor. Since EXST 7999 is a Permission of Instructor course, you must give consent for this student to register for EXST 7999. By consenting, you will be acknowledging that you will be supervising the student in activities that will meet the requirements for EXST 7999. You will be listed as the instructor of record and thus will assign a grade (A, B, etc., unless the student requests Pass/Fail grading) and sign the grade sheet for this student at the end of the semester.

Please circle the appropriate action (APPROVE or REJECT) and sign below. This form should be returned to room 161 as soon as possible.

Action: ☐ APPROVE ☐ REJECT

Supervising Faculty Signature ___________________________ Date _____________