

**MILWAUKEE SCHOOL OF ENGINEERING
ELECTRICAL ENGINEERING AND COMPUTER SCIENCE DEPARTMENT**

INDEPENDENT STUDY REQUEST

Date: _____ requests to enroll in:
(Student Name)

Undergraduate

_____ BME-4999 Biomedical Engineering Independent Study for _____ credits

_____ CPE-4999 Computer Engineering Independent Study for _____ credits

_____ CSC-4999 Computer Science Independent Study for _____ credits

_____ ELE-4999 Electrical Engineering Independent Study for _____ credits

_____ SWE-4999 Software Engineering Independent Study for _____ credits

Graduate

_____ ELE-6999 Electrical Engineering Independent Study for _____ credits

_____ CSC-6999 Computer Science Independent Study for _____ credits

_____ EGR-6999 MSE Engineering Independent Study for _____ credits

_____ PER-6999 MSP Perfusion Independent Study for _____ credits

Project Title: _____

Project faculty advisor will be: _____

Registration will be for the _____ semester.

Note: ALL work will be completed during this semester.

Attach to this form:

- Student learning outcomes
- Description of the project or course of study
- Proposed method of solution
- Deliverables, with due dates
- Grading criteria (as discussed with faculty advisor)

NOTE: Form must be completed by week 10 preceding the semester of enrollment and presented at time of registration.

PROVIDE COPIES TO:

*Registrar's Office

*Student

*Faculty Advisor

*Program Director

*EECS Office - eecsrequest@msoe.edu

Approved by:

Faculty Advisor

Program Director

EECS Department Chair

Note that independent studies scheduled for summer terms are approved only in extraordinary circumstances.

Revised 11/10/2022