

INDEPENDENT STUDY COURSE APPROVAL FORM

Wharton School Doctoral Programs Office
University of Pennsylvania
3620 Locust Walk/6302

Current Term and Year: _____

Student's Name: _____ Student's Department: _____

Social Security #: XXX-XX- (last four digits) E-Mail: _____

Instructor: _____ E-mail: _____

Telephone: _____ Dept/Div.: _____

Course Number : (_ _ _) **999** _____
DEPT Sec Number

All Wharton Ph.D. students are eligible to enroll in independent study courses if

- 1) the course does not duplicate a Wharton course offered in the same semester,
- 2) the student has completed an introductory course in the same field as the independent study, and
- 3) the department approves.

The signatures below certify that these conditions have been met.

Student's signature Date

Instructor's signature Date

Once completed and signed, submit to your Department administrator for registration processing. Return a copy of this form to:
Wharton Doctoral Programs Office, Steinberg Hall-Dietrich Hall, 3620 Locust Walk/6302