



BBUS 499 - Independent Study Contract

Quarter: _____ Year: _____ # of Credits*: _____

*Note: A maximum of 10 credits of Independent Study & Internship may count toward the Business degree.

Name: _____ Student #: _____

Email address: _____ Telephone #: _____

Faculty Sponsor (Print name): _____

Your concentration (circle): Accounting -- Finance – Management – Marketing – MIS – Retail Management
TIM – Self Directed

Title of Project: _____

Attach a detailed outline to include a title, proposed thesis statement, theory and methods to be used (where appropriate), plus a bibliography of appropriate sources. If you want to use this study for a specific concentration, write the concentration here: _____

The undersigned agree to this independent study contract and the attached proposal.

Student: _____
Print name Signature Date

Faculty Sponsor: _____
Print name Signature Date

Director, Undergrad Programs: _____
Print name Signature Date

For Office Use Only			
<u>499 SLN:</u>	<u>Faculty Name:</u>	<u>Registered By:</u>	<u>Date:</u>