

## Childhood Studies Independent Study Proposal Form

Name: \_\_\_\_\_

Name of proposed independent study supervisor: \_\_\_\_\_

Title/Topic of Proposed Independent study: \_\_\_\_\_

Expected graduation year: \_\_\_\_\_

I have read the Childhood Studies Independent Study FAQ (required).

- 1) What questions or topics would you like to explore in your proposed independent study? (Required)

Click or tap here to enter text.

- 2) Please list at least three readings you would like to include. (Required)

Click or tap here to enter text.

- 3) Describe what you would like to accomplish at the end of your independent study (a creative project, research paper/essay, a poster for a poster session, etc.). (Required)

Click or tap here to enter text.

- 4) Describe any specific time constraints or existing work or personal commitments that may impact your ability to devote time to your independent study. (Required)

Click or tap here to enter text.

**\*\*Submit this form to the faculty member named above by email and you will be contacted to schedule a meeting.**