

DEPARTMENT OF HISTORY  
COLORADO STATE UNIVERSITY

SPECIAL STUDIES COURSES

Return this form, completed (\*), for Chair approval. Once approved, an email will be sent to the student, with the Instructor copied, stating a seat has been opened, and to register for the class.

(\*CRN will be completed by History Department Office Personnel.)

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

Date: \_\_\_\_\_

CSU ID #: \_\_\_\_\_

Semester/Year: \_\_\_\_\_

Email (print clearly): \_\_\_\_\_

UNDERGRADUATE COURSES: (No more than 6 credits of HIST 495 can be taken.)

**HIST 495** Independent Study \*CRN:

CREDITS: \_\_\_\_\_

GRADUATE COURSES:

**HIST 586** Practicum

**HIST 587** Internship

**HIST 684** College Teaching

\*CRN:

\*CRN:

\*CRN:

**HIST 695** Independent Study

**HIST 699** Thesis

\*CRN:

\*CRN:

CREDITS: \_\_\_\_\_

PROJECT DESCRIPTION including a brief description of the graded assignments/activities and their value in determining the final grade: (Continue on back, or attach sheet, if necessary)

Faculty Member's Name (Printed): \_\_\_\_\_

Faculty Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chair's Approval: \_\_\_\_\_ Date: \_\_\_\_\_