



HISTORY
COLORADO STATE UNIVERSITY

Special Studies Courses

Student Name:

Date:

Email:

CSU ID:

Faculty Member:

Semester/Year:

Undergraduate Courses:

_____ HIST 495 Independent Study Credits: *CRN:

_____ HIST 497 Group Study Credits: *CRN:

Graduate Courses:

_____ HIST 586 Practicum Credits: *CRN:

_____ HIST 587 Internship Credits: *CRN:

_____ HIST 695 Independent Study Credits: *CRN:

_____ HIST 697 Group Study Credits: *CRN:

_____ HIST 699 Thesis Credits: *CRN:

On a separate page, include a description of the graded assignments/activities, their value in determining the final grade, a reading list, and a schedule.

Student Signature:

Date:

Faculty Signature:

Date:

Chair's Signature:

Date:

*supplied by Department of History