



## Independent Study Abroad

This form must be completed whenever a student makes arrangements with an instructor to do an Independent Study Abroad - SASS 594. It is the responsibility of the student to complete this form, have it signed by the instructor and to return it to the Registrar, Office of Student Services, Room 140, at the time of registration. **No credit will be given for the course and it will not appear on the student's transcript, unless this form is completed.**

**has agreed to work with**

*Instructor's Name*

*Student's Name*

*Student's ID*

on SASS 594 Independent Study Abroad course during (choose one semester)    Fall    Spring    Summer for  
*Year*

**Project**

**Student's Assignment listing functions and tasks to be carried out**

**Products**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

It is the responsibility of the student to complete this form, have it signed by the instructor, and to return it to the Registrar, Office of Student Services, by email ([msassreg@case.edu](mailto:msassreg@case.edu)) at the time of registration.