Jeilie

MICHIGAN STATE UNIVERSITY

APPLICATION FOR INDEPENDENT STUDY

PLEASE READ THE GUIDELINES BEFORE COMPLETING THIS FORM.
ALL ITEMS MUST BE COMPLETED BEFORE APPROVAL SIGNATURES ARE OBTAINED.

Please Type or Print NAME:	***************************************				DATE:	
PID;	Last LEVEL:	First CLASS:		Middle Initial	CUMULATIVE GR. POINT AVERAGE:	ADE -
COURSE SUBJECT CODE SECTION NUMBER		*	CREDITS	<u>3</u> s	EMESTER	20
Number of other Independent of the credits to be earned the				<u>r</u> Independent S mester credit e		
1. DESCRIPTION (Subje	(0)240			C 101		
FORMAL ME	THODS OF	DEDUCT	UE REASO	MING. L	OGIL OF CO	ONHECTIVES,
QUANTIFIER!		Charles and the second second			S, AND E	St. 40 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. RATIONALE (Why inde	362 11 1000 11 1000 1	et engi ewsen	COST (0.10 E	37.3	fire, north noic yearn	at the other than
THIS CLASS		/ • /				
						REGUIREME
3. PREPARATION (Relev	14	÷		1	Ameda genta las	
	^	ORK AS	Appendix of the second			
	inowi zani y		Wateriane.	10 E 7 E 10 HAS	: : : : : : : : : : : : : : : : : : : :	2001 32 11 4
4. WORK TO BE COMPL (a) Type and amount o						30.
	THE ST	ODEN7	WILL PI	ARTICIPI	41E IN A	LL
THE INST	RUCTIONA	L & LE	ARHING	ACTIO	171ES OF	i nii
THE	PHL	330 CI	ASS.	-17 (Oral of the	meonal tripis leaves	tad
(b) Estimated contact with instructor:		PHL 330		ine for submitti nal evaluation:	ng work SAME	45 PHL330
(d) Evaluation procedur	e SAME	AS PHL 3	330. 70	SATISF	Y THE GI	ZAD LOGIC
REQ'MI, A	FINIAL COL	ORSE GRA	DE OF A	17 LEAST	3.0 MOST	BE FARNEL
STUDENT'S SIGNATURE		*, **		PHON	/E	
		APF	PROVALS	9	\$1 #	,
nstructor Signature	4 ,1 4 4	Date	-Academic A	dvisor		Date
Instructor Name - Printed	4		Chairperso	n, Department Offering Co	ourse	Date
DISTRIBUTION (By Depail Chaliperson, Dept. Offering Cou Student Instructor		se)	Photoco Asst. I Adviso	Dean, Student's C	ent, per College prefer College	ence, to: