

APPROVAL FORM
Independent Study (660-799)

**Email completed form to msdrake@wisc.edu or put the printed out and completed form in Marina Drake's mailbox on the 5th floor (by the elevator). She will email to let you know when you can enroll in the course.*

Student Name: _____ Date: _____

Student ID Number: _____ Degree Program (e.g., MM in Voice): _____

INDEPENDENT STUDY 660-799 for _____ credits (choose 1, 2 OR 3 credits)

Semester: _____ Instructor: _____

→ DESCRIBE THE WORK YOU WILL BE DOING IN THE INDEPENDENT STUDY (e.g., baroque violin literature, etc.)

_____ (Attach sheet if necessary.)

CHOOSE ONE:

___ This course ***WILL NOT*** count toward a SPECIFIC degree requirement (i.e., you'll use it as an elective). (IN THIS CASE, YOU **DON'T** NEED TO GET ANY SIGNATURES, AND YOU'RE READY TO TURN IN THIS FORM!)

OR:

___ ***This course WILL count toward a SPECIFIC degree requirement (for example, "Ensemble Requirement," "Minor Coursework, etc.)***

→ PLEASE SPECIFY THE DEGREE REQUIREMENT THE COURSE WILL FULFILL. (For example: Minor coursework, Required work in Music History and Theory)

(In this case, you MUST have permission from your major professor AND the course instructor and will need their signatures.)

Signature of Major Professor: _____

Signature of Instructor: _____