

University of Vermont Department of History
Special Course Approval Form

STUDENT NAME _____ **UVM Net ID** _____

Undergraduate Student in _____ College OR Graduate Student: HISTORY or HP

Semester of Special Course _____ Year _____

CRN#	Course Number	Credits	Course Title/Subject of Study
_____	HST 3993 Independent Study	_____	_____
_____	HST 3995 Undergraduate Research	_____	_____
_____	HST 3991 Internship in History	_____	_____
_____	HST 4996 Honors	_____	_____
_____	HST 6391 Master's Thesis Research	_____	_____
_____	HST 6991 Graduate Internship	_____	_____
_____	HST 6993 Graduate Independent Study	_____	_____
_____	HST 6995 Graduate Independent Research	_____	_____
_____	Other _____	_____	_____

We suggest that the Student and Faculty member prepare a written plan of assignments and requirements at the outset of the course.

FACULTY MEMBER DIRECTING STUDY Signature _____ Date _____

Print name: _____

Please return completed forms to:
 Ande Tagliamonte, Program Coordinator