

COLLEGE OF EDUCATION
LEHIGH UNIVERSITY

INDEPENDENT STUDY OR FIELD STUDY AGREEMENT

Date

1. Name _____

2. Program _____

3. Course (check one)	Educ 494 _____ (Field Work)	_____ Cr. Hrs.	_____ Semester
	Educ 495 _____ (Independent Study and Research)	_____ Cr. Hrs.	_____ Semester

4. Project Title _____

5. Proposal Description (Attach a separate, typed presentation of the proposal)

The proposal should include:

- a. A precise statement of the problem,
- b. The methodology to be used,
- c. The anticipated end product, and
- d. The criteria to be met.

6. Previous Internship/Independent Studies/Field Work: _____

7. Student's Signature _____ Date _____

8. Independent Study & Research/Field Study Advisor Approval:

Signature Date

9. Academic Advisor Approval:

Signature Date

THIS PROPOSAL SHOULD BE SUBMITTED TO THE ACADEMIC ADVISOR AND
INDEPENDENT/FIELD STUDY ADVISOR **PRIOR TO REGISTRATION**. EXCEPTIONS
TO THIS REQUIREMENT ARE TO BE CLEARED WITH THE PROGRAM COORDINATOR.