Please send completed form to your instructor at
Stephen F. Austin State University
Department of Elementary Education
Box 13017 – SFA Station
Nacogdoches, TX 75962

Application for Special Problems or Advanced Graduate Studies

ELE 475, ELE 575, or ELE 576

Student's Name _____ **ID #** _____

Local Address _____ **Local Phone** _____

_____

Email _____ **Semester** _____

ELE 475 ELE 575 ELE 576

(circle the course number you are requesting)

Total semester hours credit: _____

Complete this form in triplicate: one copy each for student, professor, and department. May attach pages if more space is needed.

I. Reason for requesting this course:

II. Method of procedure and materials to be used:

III. Type of report or project to be made:

IV. Scheduled date of completion _____

I propose the above plan and request that _____ **(professor's name)** supervise my study. I agree to report to my professor during the first week of classes to schedule conferences concerning my special problems study. Also, I agree to complete all assigned projects **two weeks** before final exams and give them to the professor.

_____ _____
(Student's signature) Date (Professor's signature) Date

I agree to direct the above study.

_____ Approved
_____ Disapproved

_____
(Department Chair's signature) Date

The above named student has satisfactorily completed the above plan. Semester grade _____.
Title of course to be placed on the student's transcript:

_____