



## Master of Information Individual Study Proposal Form

Name \_\_\_\_\_ RUID \_\_\_\_\_

Email Address \_\_\_\_\_

Term of Proposed Study (semester & year) \_\_\_\_\_

Have you taken an Individual Study in a prior semester? Yes  No

\*Note: this is not a Field Experience 17:610:592

SC&I faculty member supervising this Individual Study: \_\_\_\_\_

**Learning goals:** (We strongly encourage you to develop the learning goals and focus in consultation with the faculty supervisor. Additional goals can be added on an attached page.)

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

**The title and focus of the proposed study:** (use an additional page if necessary)  
\_\_\_\_\_  
\_\_\_\_\_

**Indicate how you will communicate your status/progress to your faculty supervisor (e.g., weekly email reports, meetings on xx date(s), course shell interactions, etc.):**  
\_\_\_\_\_  
\_\_\_\_\_

**Proposed date of completion:** \_\_\_\_\_

Student's signature

Date

**"I agree to work with the above student as outlined and recommend approval of this application."**

Faculty supervisor's signature

Date

**Please email this completed form to ([mi@comminfo.rutgers.edu](mailto:mi@comminfo.rutgers.edu)) to receive your special permission number for registration.**