

The University of Nevada, Las Vegas
DEPARTMENT OF EDUCATIONAL PSYCHOLOGY & HIGHER EDUCATION
APPROVAL FOR INDIVIDUAL STUDY/RESEARCH COURSES
(EPY 780, 782, 783, 787)

Name _____ UNLV ID# _____

Date _____

Status: Graduate _____ Undergraduate _____ Other (Specify) _____

Semester/Year _____ Course and Section Number _____ Credits _____

Description of Proposed Project, Area of Study, etc.
(Must be submitted prior to registration.)

Approved:

Student _____ Date _____

Student's Committee Chair _____ Date _____

Instructor _____ Date _____

Dept. Chair/Grad. Coord. _____ Date _____