Undergraduate
Independent Study Form
ARTID 490

Student Name ___________________________ Major ___________________________

Email Address ___________________________ ID Number __________ Term/Year __________

Select Topic:

☐ ARTID 490 - Interior Design ☐ ARTID 490H - Honors

Course Title: ___________________________ Section _______ Credits (1-6) _______

Instructor's Name: ___________________________

List all art/design and related prerequisite courses you have completed or are currently taking which give you appropriate background for this course proposal.


Description of content and objectives of the course (attach additional pages if necessary):


Meeting Arrangements (Days/Time):

Where will this course apply for degree requirements?

Signatures Required for Approval :

Student ______________________________________________________________________ Date __________

Instructor _____________________________________________________________________ Date __________

Advisor ______________________________________________________________________ Date __________

Chair of Department ______________________________________________________________________ Date __________

After approval, the student emails this form to design-ss@iastate.edu.
To register for the course, prepare a digital Schedule Change form, found in AccessPlus.