Undergraduate
Independent Study Form
IND D 490

Student Name ___________________________ Major ___________________________
Email Address ___________________________ ID Number _____________ Term/Year _____________

Select Topic:
☐ IND D 490A - Theory, Crit, Methodology ☐ IND D 490B - Experimental Techniques ☐ IND D 490C - 3D Design
☐ IND D 490B - Distributed Collaboration ☐ IND D 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.