



ANIMAL SCIENCE

Institute of Agriculture and Natural Resources

UNIVERSITY OF NEBRASKA-LINCOLN
ANIMAL SCIENCE DEPARTMENT
GRADUATE INDEPENDENT STUDY
CONTRACT FORM

Must be typed and completed prior to start of study

Please mark one of the following: _____ ASCI 896 _____ ASCI 996

Name _____ Student ID# _____ Date _____
Address _____ Major _____ Option _____
E-mail _____ Phone _____
Credit hours _____ Semester _____ Year _____

General description of the independent study (what you plan to do, etc).

Goals and objectives of the activity (If this is for a proposed class, please attach a syllabus; if this is for a special project that is outside your thesis/dissertation work, provide the specific objectives of the project).

Name of instructor and description of what you'll do or provide your instructor to serve as a basis for assigning a grade.

Student's signature _____ Date _____

Advisor's signature _____ Date _____

Grad Chair signature _____ Date _____

Form must be emailed to Dr. Jennifer Wood, jwood5@unl.edu to receive a permission code to register for the class.