

**University at Buffalo**  
**School of Engineering and Applied Sciences**

**Informal Course (Individual Problems or Independent Study) Form**

Submit to Department Graduate Studies Office before end of the the semester drop/add deadline.

Student Name: \_\_\_\_\_ Person No.: \_\_\_\_\_  
(Please print)

Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_  
(Year) (Year) (Year)

Course Number: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Supervising Faculty Member: \_\_\_\_\_

Grading Scheme: Letter \_\_\_\_\_ or S/U \_\_\_\_\_

Title of Informal Study: \_\_\_\_\_

Description of Informal Study: \_\_\_\_\_

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Student Signature: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Please Print) (Signature) (Date)

Faculty Signature: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Please Print) (Signature) (Date)

Director of Graduate Studies  
or Chair Signature: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Please Print) (Signature) (Date)