

DOCTORAL STUDENT AGREEMENT FOR INDEPENDENT STUDY
Course: LIS 601

Please complete all information below before obtaining signatures.

Faculty Sponsor:

Student: _____

Student ID #: _____

Address:

Tel (home): _____ (work): _____

E-mail:

Semester or Session

Year :

No. of Credits:

Title of Project :

Area of examination:

Method to be followed in examination:

Form of final presentation:

Submit this form to the sponsoring faculty member for a signature. The student will then acquire the signature of the PhD Program Director, and will deliver the form to the Doctoral Program Assistant (or email to slisphd@simmons.edu). If the sponsoring faculty member is the PhD Program Director, another member of the Doctoral Committee's signature will also be required. Upon obtaining all signatures, the PhD Program Director will inform the Curriculum Director to register the student.

Signature of Student:

Date: _____

Signature of Faculty Sponsor:

Date: _____

Signature of PhD Program Director/Committee Member:

Date: _____

Simmons College Human Subjects Guidelines

Does this study involve Human Subjects?

If yes, this study **must be reviewed** by the Simmons College Institutional Review Board. Attach approval of the Simmons College Institutional Review Board.