College of Charleston

APPLICATION FOR INDIVIDUAL ENROLLMENT

☐ TUTORIAL ☐ INDEPENDENT STUDY ☐ RESEARCH SEMINAR

☐ FIELD INTERNSHIP ☐ SENIOR PAPER ☐ BACHELOR'S ESSAY

This form is to be filled in by the student with project supervisor's assistance. After signatures of the student and supervisor have been added, this form should be submitted to the Chair of the Department, the Undergraduate Dean and the Registrar for their signatures.

Student's Name:_____ **Student ID Number** ☐☐☐ ☐☐ ☐☐☐☐

Course ID Number: ☐☐☐☐ ☐☐☐ **Credit Hours :** ☐ **Semester:** ☐☐☐☐☐☐

Project Supervisor:_____

Project Title:_____

Project Description:_____

Signatures:

_____ ____/____/____
Student **Date**

_____ ____/____/____
Project Supervisor **Date**

_____ ____/____/____
Department Head **Date**