



# 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: \_\_\_\_\_

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Signatures:

_____	_____/_____/_____
Student	Date
_____	_____/_____/_____
Project Supervisor	Date
_____	_____/_____/_____
Department Head	Date