

Independent Research Registration Form

Please check one: One (1) Credit Two (2) Credits

Name: _____ Student ID #: _____

FAMU E-Mail Address: _____ Telephone No. _____

Indicate Semester and Year of Project: FALL _____ SPRING _____ SUMMER _____

Name of Faculty Supervisor: _____

Signature of Faculty Supervisor: _____ Date: _____

Title of Project: _____

Provide the information requested below on supplementary pages. Attach supplementary pages and application together and submit the completed package to the College of Law Registrar's Office **ON OR BEFORE THE FIRST DAY OF THE ADD/DROP PERIOD** of the semester you plan to enroll in the Independent Research course.

- I. Complete description and preliminary outline of Project;
- II. Expected length of paper (in pages);
- III. Expected Research Sources to be consulted;
- IV. Major court decisions to be analyzed; and
- V. Major statutory provisions to be analyzed.

This application form, including attachments, must be completed by the student, approved by the supervising faculty member and Associate Dean for Academic Affairs and submitted to the College of Law Registrar's Office **ON OR BEFORE THE FIRST DAY OF ADD/DROP PERIOD** of the semester you plan to enroll in the Independent Research course.

Selecting a Faculty Supervisor:

Only Full-Time Faculty members may supervise Upper-Level Writing Requirement for Independent Research course.

Student Signature: _____ **Date:** _____

Associate Dean for Academic Affairs Signature: _____ **Date:** _____