INDEPENDENT STUDY REQUEST MAINE MARITIME ACADEMY

Student Name:		
	following course as an independent solon in addition to any tuition charges. Fill not be reimbursable.	
Course Name:	Course #:	Credits:
т	he course will be taken during the sc	heduled Fall/Spring semester
The course will be ta (Academic Dean approval	aken off-campus/during the summer t required):	for the following reasons
		Date
Approved/Disapproved:	Faculty Signature	Date
Approved/Disapproved:	Department Chair Signature	Date
For off-campus or summer o	only:	
Approved/Disapprov	ved:	
	Academic Dean Signature	Date
REVISED 1/20/2012	Entered by:	Copy to Finance: