

Enrollment Application

TV/R 5010 (3 credits) Independent Project

Complete *all* information on this form and submit to room 304 Whitehead

Semester and year _____

Today's Date ____/____/____ CUNYfirst EMPLID# _____

NAME _____ E-mail _____

Home Address _____ City _____

State _____ Zip _____ Phone () _____

Number of credits completed to date _____ Current GPA _____

I have taken the following TV/R courses: (Please circle all that have been **completed**).

1165 2616 2265 2420 2726W 3728 3841 3861 3871 3951 4430W 4728

The title of my Independent Project is: _____

I will be working with Professor _____

Attached is my written Independent Project Proposal.

[DO NOT write below this line]

Permission Granted _____ Yes _____ No _____

Chair's Signature _____ Date _____

Permission Issued on _____