

FIELDWORK

Registrar's Office/State University of New York at New Paltz

Fall Spring
 Summer I Summer II 20__

PLEASE ATTACH A CURRENT TRANSCRIPT TO THIS FORM.

The guidelines for independent study vary. Consult the appropriate faculty dean for further information.

Last Name	First Name	MI	Class	Student ID #
Local Address	Zip Code	(Area Code)	Telephone Number	

COURSE NO. _____	<i>Check one:</i> 494 _____ 594 _____ 794 _____	SECTION NO. _____ (Assigned by Registrar's Office)
Undergraduate level _____ Department _____		CREDITS: _____
Graduate level _____ Department _____		LA _____ (yes) _____ (no) (Assigned by Dean)

A. Title of Project _____

B. _____
Name of Organization Address Telephone No.

On Site Supervisor Number of Hours Per Week

- C. Describe your proposed fieldwork project. Type or print clearly. Use additional pages if necessary.
1. What are your responsibilities on the site? What special project will you be working on? What do you expect to learn?
 2. How is the proposal related to your major areas of interest? Describe the course work you have completed which provides appropriate background to the project.
 3. What is the proposed method of study? Where appropriate, cite readings and practical experience.

D. To be completed by the instructor: On what basis will the project be evaluated? What assignments will be required?

Signature of Student Date

Print Instructor Name Date

Signature of Department Chair Date

Signature of Instructor Date

Signature of Dean Date

Instructor I.D. #