

Individual Study in Neuroscience (NEUR 493/494) Course Approval Form

Student's Name: _____

Tentative Title of the Independent Study:

In the box below please give a 1–2 paragraph description of your independent study, indicating the nature of the study, the possible hypothesis(es) tested, subjects, and/or general methodology to be used, etc.

Brief description of the course schedule (e.g., when/how often will you meet?, etc.).

Brief description of the course outcome/product (e.g., a paper/presentation on a subject, software, etc.).

Professor's Signature (Instructor)

Student's Signature

Signature of the Neuroscience Program Chair

Note: Significant departure from the approved topic may require the submission of a new Approval Form.