EASTERN CONNECTICUT STATE UNIVERSITY
Approval/Permission to Register for
GRADUATE INDEPENDENT STUDY/RESEARCH AND READINGS
OR THESIS PROJECT

Instructions:
1. Print all information.
2. Students MUST COMPLETE REVERSE SIDE.
3. Students must have a minimum cumulative G.P.A. of 3.0 in order to register for an Independent Study, Research and Readings, or Thesis.
4. Obtain approval signatures from the a) independent study advisor or thesis advisor and reader and b) the supervising department chair. Submit this form to the Graduate Division for final approval.
5. With dean's approval, copies of the approved form will be sent to the advisor, department chair, and the Registrar's Office.
6. Upon receipt, the Registrar's Office will process the approved registration request. (Part-time students will be sent a bill which is payable immediately.)
7. Any changes to this registration request (i.e. drop/withdrawal) are the responsibility of the student and must be submitted to the Registrar's Office prior to applicable deadline.
8. REGISTRATIONS WILL NOT BE PROCESSED WITHOUT ALL SIGNATURES.
9. REGISTRATIONS WILL NOT BE ACCEPTED AFTER THE DEADLINES STATED ON THE ACADEMIC CALENDAR.

I have read and will comply with the above:

Student Signature: ___________________________ Date: ______

Name: ___________________________ Eastern ID: _______ Phone: __________
Graduate Program: ___________________________ Overall GPA: ______
Subject / Course Number: ___________________________ Credits: ______
Title: ____________________________________________

☐ Independent Study/Readings and Research  ☐ Thesis I  ☐ Thesis II

CIRCLE SESSION AND WRITE IN YEAR:
Fall  Spring  Intersession  Summer  Year ______

APPROVAL SIGNATURES:
Independent Study/Research and Reading Advisor:
Print: ___________________________ Signature: ___________________________ Date: ______
Thesis Advisor:
Print: ___________________________ Signature: ___________________________ Date: ______
Second Reader:
Print: ___________________________ Signature: ___________________________ Date: ______
Department Chair:
Print: ___________________________ Signature: ___________________________ Date: ______
Dean of Graduate Division:
Print: ___________________________ Signature: ___________________________ Date: ______

Registrar’s Office Use Only:
Section Code: _____ CRN: _________ Processed by: _________________________ Date: ______

Rev. 5/04
Independent Study/Readings and Research (Complete A – E or attach a copy of the research proposal.)

A. Topic area: ____________________________________________________________

B. Objective: ____________________________________________________________

C. Readings and other materials: __________________________________________

D. Advisor’s evaluation of proposal (to be completed by faculty advisor):

E. Outline of how the study will be conducted and evaluated:

Thesis I

A. Topic area: ____________________________________________________________

B. Please note that a copy of the thesis proposal draft must be submitted to the thesis advisor and reader by the eighth week of classes.

Thesis II

A. Thesis title: ____________________________________________________________

B. Attach a copy of the signed Approval of Thesis Proposal form and the approved thesis proposal. You will not be allowed to register for Thesis II without both of these documents and all of the appropriate signatures. In addition, you must adhere to all registration and submission deadlines published in the Academic Calendar and Graduate Division Bulletin.