SDSU Economics Department
Special Study Registration

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Name: _____ Date: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip)

Telephone Number(s): _____ Red ID: _____

Course Number: _____ Schedule Number: _____ Semester/Year: _____

Please Circle One: Grade Letter Credit/No Credit Please Circle Number of Units: 1 2 3

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1. Title of Project:

2. Brief Outline of Project: (attach additional page if needed)

3. Project Assignments to be Completed:

4. Approval Granted

_____
Student Signature

_____ _____
Supervising Instructor Signature Department Chair Signature

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Project Grade (to be completed by supervising instructor)

Please circle one grade below and return to SDSU Economics Department Office

A B C D F W U Incomplete Credit No Credit

_____ _____
Supervising Instructor Signature Date
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