BBA INDEPENDENT STUDY AUTHORIZATION
MGMT 451 OR 452

**Instructions:** Students are responsible for working with Anderson faculty and Department Chairs to arrange an Independent Study. Once this form is complete with all required signatures, you must return it to the Advisement Center.

---

**To be completed by Student:**

Student Name: ____________________________

UNM ID #:_________________________

Student Email: _________________________

Student Concentration: ____________________________

Instructor Name: ____________________________

**Briefly describe your Independent Study Proposal:**

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

---

**To be completed by Authorizing Instructor:**

Credit hours approved for: _______  
(1, 2, 3, or more)  

Semester: _______  
(Spring/Fall/Summer)  

Year: _______  
(2007, 2008, etc)

Please check one of the following:

Course may be used as:  
___ Free Elective  
___ Concentration Elective  
___ Other: Please specify:__________________________

**Required Signatures:**

______________________________________________________  Date

Student

______________________________________________________  Date

Instructor

______________________________________________________  Date

Department Chair

______________________________________________________  Date

Sr. Associate Dean

______________________________________________________  Date