

Individual Research (5797A/D)

Application Form 2024-2025

Student Name [print]:					
Student Number:		Western Email:			
Title of Project:					
Supervisor's Name:					
Number of Credit Hours sough	ht: Fa	all Term	and/or Wint	er Term	
In order to obtain approval, st contains specific information t	• • • • • • • • • • • • • • • • • • • •				
 Working Title Description of the P Hypothesis Sources Credit Hours and Plate Anticipated length of 	nn of Supervision				
Written work and/or papers a Research is undertaken.					
Date:	Signature:				
Supervisor's Signature: [or att	tach email correspond	lence]			
<u>Instructions</u> : Complete the for acceptance (signature or email submit it by the deadline. Your	l) or save it all as a PD	F with the file	ename "IRP applic	ation – [your name]" and	
	Email directly to Shar	ne Chelladura	ni <u>schella@uwo.ca</u>	<u>a</u>	
Fall Term Deadline:		Monday, September 9, 2024 at 4:00 pm			
Winter '	Term Deadline:	Thursday,	January 16, 2025	at 4:00 pm	
Applications red	ceived by the deadline	e will be revi	ewed before the	end of Add/Drop	
OFFICE USE ONLY					
Faculty Reviewer: [name]					
☐ Approved by	Course #:				
☐ Returned for Revision	PeopleSoft Class #:			☐ Course in OWL	
☐ Rejected by	☐ Added Instructo	r 🗖	Adjusted credits	☐ Enrolled student	

☐ Notified student on [date]: _____