## Buffalo State – State University of New York

## Individual Graduate Study Application

**Directions:**

1. Student to complete Parts A and B.
2. Confirm eligibility with advisor and obtain signatures of Instructor and Chairperson (Part C).
3. Return the completed and approved application and to the appropriate School Dean of registered course by the Individual Study Application deadline. See academic calendar:

<http://suny.buffalostate.edu/academic-calendar>. Retain a copy for your records.

1. **School Dean will send form to Graduate School for course verification. The Graduate School reserves the right to change the course listed below based on the Thesis/Project Continuation Policy.** 722 Course registration is billable at one graduate credit of the current tuition rates.
2. Payment: If registration for course occurs after deadline and is not included on your bill, contact Student Accounts for payment information. Failure to do so may result in late fees being assessed.

**Part A:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Semester/year:** | | | Fall | | J-term**\*** | | Spring | | Summer**\*** ES, LS, VS  ***(circle session)*** | | | | | 20 | | **Major:** | | |  |
| **Name:** |  | | | | |  | | | | |  | | **Banner:** | | |  | | | |
|  | *Last* | | | | | *First* | | | | | *Middle* | |  | | |  | | | |
| **Local Address:** | |  | | | | | | | |  | | | |  | | | |  | |
|  | | *Street* | | | | | | | | *City* | | | | *State* | | | | *Zip* | |
| **Phone Number:** | | |  | | | | | **Email Address:** | | | |  | | | | | | | |
| **Student Signature:** | | | |  | | | | | | | | | | | **Date:** | |  | | |

**\*The Graduate School does not require registration of Continuation courses during the J-term or summer semester.**

**Part B:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Graduate Thesis/Project Continuation** |  | 721 | *For Graduate School use only:* |
| *\*Non-billable – may be required for up to two semesters immediately after the semester an “IP” grade was received AND registration for all other program requirements has occurred.* | *Department Prefix* |  |
| **Graduate Thesis/Project Extended\*\*** |  | 722 |
| *\*\*Billable for one credit hour each semester until thesis/project is completed. Billed at existing graduate tuition rates.* | *Department Prefix* |  |

**Part C:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | B |
| *Instructor’s Name* | *Instructor’s Signature* | *Date* | *Inst. Banner #* |
|  |  |  | |
| *Department Chair’s Name* | *Chair’s Signature* | *Date* | |
|  |  |  | |
| *Academic Dean’s Name* | *Dean’s Signature* | *Date* | |
| Marnie Letzelter, Assistant to the Dean |  |  | |
| *Graduate School Representative’s Name* | *Graduate School Signature* | *Date* | |