



Cardozo School of Law  
Office of the Registrar

55 Fifth Ave., Room 1034  
New York, NY 10003-4391  
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## INDEPENDENT RESEARCH - APPLICATION

Students may elect to register for Independent Research with the permission of a full-time faculty member. They may receive a maximum of three (3) credits toward graduation; however, they may receive no more than two (2) credits in any one semester. Please refer to the Independent Research section of the “Student Handbook” for specific academic regulations governing independent coursework.

**Instructions:** Please fill out this form and obtain the signature of the supervising faculty member. Bring it to the receptionist in the Dean’s Office Suite, Room 1010. The Vice Dean will contact you if there are any questions. If approved, it will be returned to the Registrar’s Office and you will be notified by email that it has been approved.

### Please Print Legibly

Name: \_\_\_\_\_ Student I.D #: \_\_\_\_\_

Address: \_\_\_\_\_  
Number & Street City State Zip

Home Phone #: (\_\_\_\_) \_\_\_\_\_ Cell Phone #: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Faculty member supervising this independent research: \_\_\_\_\_

Subject area of research: \_\_\_\_\_

My independent research will be for (check one):      \_\_\_ 1 Credit      \_\_\_ 2 Credits

The semester for my research will be (check one):      \_\_\_ Fall      \_\_\_ Spring

**Please Note:** Students are limited to an overall maximum of 16 credits per semester. Credits earned in an independent research project are counted as part of the 16 credits.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Do not write below this line**

Signature of Faculty Member: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Vice Dean: \_\_\_\_\_ Date: \_\_\_\_\_