

ANSC 399 Special Problems Permission Form

Year: 20_____

Date: _____

Circle applicable semester:

Spring Summer I Summer II Fall Winter

Student _____ UID _____

Instructor's Name _____ Signature _____

Section Number _____

Credit(s) _____

Nature of Special Problem _____

How will you be evaluated? (paper, presentation, etc.)

ANSC Undergraduate Office
(Asst. Director)