

INDEPENDENT STUDY PROJECT

Date: _____

To Whom It May Concern:

Professor _____ and _____
Name (Printed) Student's Name (Printed) & RU ID Number

entered into an agreement for the Fall / Spring _____ semester to work and complete a

_____ credit Independent Study Project under the auspices of the Criminal Justice Program.

Final projects and papers must be submitted electronically to both the faculty advisor and to the Criminal Justice department email account: cjmnb@rci.rutgers.edu.

The proposed project is titled _____
_____.

Professor's Signature: _____ Date _____

Student's Signature: _____ Date _____