

DEPARTMENT OF COMPARATIVE LITERATURE
CPLT 497P
Supervised Reading

FULL NAME: _____

ID #: _____ Semester & Year _____

Project/Course Instructor: _____

Credit Hours: _____

Description of Project/Course of Study:

Project/Course Evaluation Procedure:

Instructor Signature: _____ Date: _____

Approval of DUS: _____ Date: _____