

INDIVIDUAL WORK PERMISSION FORM--CCJ 4905 (LETTER GRADED)

CCJ 4905 SECTION: _____ **SEMESTER & YEAR:** _____

CREDITS/HOURS (1-3): _____

STUDENT'S NAME: _____ **UFID:** _____

STUDENT'S EMAIL: _____

SUPERVISING INSTRUCTOR: _____

NATURE OF ACTIVITIES: _____

STUDENT SIGNATURE: _____

SUPERVISING INSTRUCTOR SIGNATURE: _____