

**PERMISSION TO REGISTER FOR INDIVIDUALIZED STUDY**  
**Historic Preservation Program, School of Architecture & Allied Arts, University of Oregon**

STUDENT NAME: \_\_\_\_\_ Student ID# \_\_\_\_\_

Term:     Fall                     Winter                     Spring                     Summer                    20\_\_\_\_\_

**Instructions:**

1. This form must be completed and signed by the instructor before registration.
2. Fill in the blanks for the course checked below (one course per form, please). Please fill in a brief title (for example: "Brick Arches", "Bungalow Style", "Tax Incentives", etc.).
3. Turn in the completed form to the Historic Preservation Office Coordinator. You will still need to register by duck-call!

Check the appropriate box:	CREDITS	DESCRIPTIVE TITLE <small>(no more than 22 characters including space AND the heading indicated below; this title will appear on your transcript)</small>	CRN
<input type="checkbox"/> AAAP 601 Research	_____*	<u>Res</u> _____	_____
<input type="checkbox"/> AAAP 605 Reading/Conference	_____*	<u>Read</u> _____	_____
<input type="checkbox"/> AAAP 606 Special Problems	_____*	<u>Sp Pr</u> _____	_____

\* 3 credits maximum per term without HP Committee approval.

**BRIEF DESCRIPTION:**

**END PRODUCT;**

- Written paper  
 Other (describe)

_____ Signature of Student	_____ Date
_____ Signature of Instructor, authorizing registration	_____ Date

*OFFICE USE ONLY:*

FINAL GRADE \_\_\_\_\_ Instructor's Initials \_\_\_\_\_ Date \_\_\_\_\_