



PRINCETON UNIVERSITY  
The Graduate School

## Proposed Reading Course Form

Date: \_\_\_\_\_ Offered: Fall Term \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Spring Term \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Department: \_\_\_\_\_ Course Number: \_\_\_\_\_  
(including dept.prefix)

Title: \_\_\_\_\_

Instructor: \_\_\_\_\_

Student/s for whom the reading course will be given: \_\_\_\_\_

\_\_\_\_\_  
List below the syllabus or reading list, and the weekly schedule, if applicable.  
(Attach separate sheets, if necessary.)

Approved       Not Approved

\_\_\_\_\_  
Signature of DGS or Department Head

\_\_\_\_\_  
Signature of Academic Dean