

History Department Individual Writing Tutorial

Please print only

Semester: Fall A / Spring B Year:

Name:

Last: _____ First: _____

Advisor Name for Writing Tutorial

School Address: _____ College: _____

College: _____ College Dean: _____

Email Address: _____

Year of Graduation: _____

Title of Course: _____

Please attach all documents, (books, articles, and syllabus).
Your IWT advisor must sign this form.

Advisor Signature: _____

Student Signature: _____

DUS Signature: _____

Date: _____

All information must be attached and returned to HGS room 237