

Student:	Advisor:	Date:
----------	----------	-------

# Alternative Studio Elective Form: Visual Studies Emphasis

Department of Art and Design: Grand Valley State University

Course Requested \_\_\_\_\_

Course Faculty or Department (of course) representative: \_\_\_\_\_

Term do you propose enrolling in this course: \_\_\_\_\_

Please explain how this course contributes to your studio work. Be specific about how this course serves your learning objectives (you may need to revise your learning plan as part of this process). Be specific in discussing details about the course and the particulars of your learning objectives. Please type in the space below. You may add additional pages. Advisor signature indicates authorization of proposed course as a studio elective.

**signatures**

Student:	Advisor:	Date:
----------	----------	-------