

REQUEST FOR INDEPENDENT STUDY

INDEPENDENT STUDY – designed to cover specialized material not usually included in a course offering listed in the catalog. MUST BE SUPERVISED BY AN APPROVED FACULTY MEMBER.

ALL ITEMS MUST BE ATTACHED TO THE PROPOSAL OR IT WILL BE RETURNED TO THE STUDENT

Name: _____ Date: _____

Address: _____

Degree/Concentration: _____ Quarter Requested: _____

1. **Consult** with desired supervisor and obtain the professor's agreement to supervise this Independent Study.

Title of the Study: _____

_____ two credit hours

_____ four credit hours

Professor's signature: _____

2. **Attach** a typed proposal containing the following; working with the desired supervising professor:
 - a. Statement of Purpose (1 paragraph)
 - b. Significance of the Study (2-3 paragraphs)
 - c. Description of the Methodology (1 page at most)
 - d. Description of the length of the project (e.g., 10-15 pages, 10 lessons, etc.)
 - e. One full page of bibliography (Turabian style) representing the complete spectrum of the study
3. **Communication Agreement:** The student must contact the professor at least once every two weeks during the independent study time period. Students are encouraged to do so by email; other options include office appointments, phone calls or other means deemed appropriate. Student signature: _____
4. **The Independent Study fee is \$50 per credit hour; a check must be attached.** (This is in addition to tuition charges.) If using student loans to pay tuition, check here if this fee is to be billed to your account: _____
5. **Submit** proposal and all items requested to the Registrar. It will then be submitted to the Academic Dean.
6. **APPROVAL** is required before an independent study may be registered for or coursework started. **The student must gain all necessary approvals before the end of the add/drop period for the desired quarter of registration.**

ACTIONS:

_____ Approved as Proposed

_____ Not approved; reason(s) follows:

_____ Approved with modifications as follows:

Academic Dean

Date

Course number assigned: _____

_____ Copy - Supervisor

_____ Copy - File

FEE PAID: _____

_____ Original – Student