

# PROPOSAL FOR UNDERGRADUATE INDEPENDENT STUDY

School/Department: \_\_\_\_\_

Student: \_\_\_\_\_ ID Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(Please Print)

Student Cumulative GPA: \_\_\_\_\_ Total Credit Hours Completed: \_\_\_\_\_

Major and Concentration (if any): \_\_\_\_\_ Email: \_\_\_\_\_

*An Independent Study may be taken on a Pass-Fail basis or for a letter grade. Students may not apply more than six hours of credit for Independent Study toward graduation requirements.*

The student must attach a 150-500 word typed proposal for the study/project. The proposal should thoroughly address:

- 1. Course Goals and Objectives:** What specific knowledge do you hope to gain or skills do you hope to learn?
- 2. Content of Proposed Course:** What topics will be addressed? From which sources will knowledge be gained? Attach a copy of your preliminary reading list, if applicable.
- 3. Conduct of Proposed Course:** How often will you meet with the supervising professor? What type of work will you produce? If the course includes written assignments, describe them in detail.
- 4. Course Evaluation:** How will your performance in the course be evaluated? How will you and the supervising professor determine if the course goals and objectives have been met?

Title of Independent Study: \_\_\_\_\_

Brief Title (for Transcript): \_\_\_\_\_  
(Please print; observe 24-character limit)

Subject Prefix \_\_\_\_\_ Course Number \_\_\_\_\_

Semester Taking Independent Study: Fall 20\_\_\_\_ Spring 20\_\_\_\_ Wintermester 20\_\_\_\_  
Summer 20\_\_\_\_: Maymester\_\_ Sum I\_\_ Sum II\_\_ Sum III\_\_ Augustmester\_\_

Credit Hours: \_\_\_\_\_ A-F or Pass/Fail Grade? \_\_\_\_\_

**By signing below, I attest that I have attached all required materials and understand the evaluation procedures for this Independent Study course.**

\_\_\_\_\_  
Student Signature Date

## APPROVALS:

Supervising Professor: \_\_\_\_\_  
Signature Print Name Date

Student's Academic Adviser: \_\_\_\_\_  
Signature Print Name Date

Department/School Curriculum Committee Chair (if required by Department/School):

\_\_\_\_\_  
Signature Print Name Date  
Chair/School Director: \_\_\_\_\_  
Signature Print Name Date

This form and the typed proposal are minimal requirements. Departments/schools may have additional forms. Completed independent study proposal forms (including all signatures) must be submitted to the Registrar's Office prior to the deadline for adding courses in the term in which the study is to be undertaken. **Staff in the Registrar's Office will enroll the student in the Independent Study course; i.e., the student need not take additional action to register for the course.**