

Independent Study Agreement

Student Name:	Student R	ocket Number
Course number:	Course Title	
Credit Hours: Seme	ester and year (fall/spring/summe	er, year):
		Phone:
		Office:
current curriculum. Independer motivated to explore an area of	nt studies are always more demandin study with minimum direction from	in ways not normally available through our g than a course since the student must be self-the faculty member. The student is expected to xpectations for adequate documentation of the
Objectives for the Indepen	dent Study:	
A attinitus and Dua donate		
Activity and Product:		
Rationale for Credit: (Expected awarded.)	ations for students and the work they comple	ete must be appropriate for the number of credit hours
Guidelines for assigning cobe determined)	ourse grade: (What type of grade – S/U	I, letter grade – will be assigned and how will the grade
be determined)		
Student Signature	Instructor Signature	Dept. Chair Signature

It is the candidate's responsibility to obtain signatures and file the study agreement (one for student; one for instructor; one for department) during the first week of classes. Agreement must be approved each semester **before** beginning independent study activity.

Form date: July 10, 2020