

APPLICATION FOR INDEPENDENT STUDY

Date_____

Name of Student_____ ID#_____

Course Name and Number_____

Semester Independent Study to be taught_____

Advisor's Approval_____

Professor's Approval_____

Department Head's Approval_____

Division Chair's Approval_____

Division Chair's rationale for approving independent study_____

Vice President for Academic Affairs Approval

Independent Study Late Fee: A late fee of \$150 per course will be charged for independent studies approved after the last day to add a class during the semester or at any time outside of a published class term.

Student's Signature_____

Fee Charged Yes _____ No _____

****PLEASE RETURN TO THE REGISTRAR'S OFFICE WITH AN ATTACHED SYLLABUS AND A CONTRACT SIGNED BY THE PROFESSOR AND THE STUDENT.**