Application for Independent Study

Student Name ___________________________________ ID# ______________________

Today’s Date _______________ Expectant Date of Graduation_____________________

Major_____________________________ Minor______________________________

If Interdisciplinary major: Primary concentration________________________________

Secondary Concentration____________________________________________________

Course Name and Catalog Number: __________________________________________________

Semester Independent Study to be taught: _____________________________________________

Advisor Approval Signature________________________________________________Date:__________

Instructor Approval Signature ______________________________________________Date:__________

Department Head Approval Signature _______________________________________Date:__________

Academic Dean Approval Signature ____________________________ Date:__________

Dean’s Rationale for approving independent study _________________________________________

_____________________________________________________________________________________

Associate Provost Approval __________________________________________________________

Independent Study Late Fee: A late fee of $260.00 per course will be charged for independent studies approved after the last day to add a class during the semester.

Student Signature: ________________________________

FEE CHARGED? Yes_______ No________

**Please return this form to the Registrar’s Office with an attached syllabus.

Revised 8/26/2019