INDEPENDENT STUDY PETITION

Requirement for Independent Study

1. Independent Study will be approved only if there is a valid academic reason.

2. Juniors and seniors may not take more than one independent study per semester unless the Academic Standards Committee grants permission for compelling academic reasons. Freshmen and sophomores will not be allowed to take an independent study unless the Academic Standards Committee grants permission for compelling academic reasons.

3. Independent Study requires a minimum 9.0 GPA for the previous semester; other evidence of the ability to perform independent work may also be required.

4. Independent Study may not cover work which is available in the regular curriculum.

5. All Independent Study Petitions must be supported and approved by a faculty reader.

6. The appropriate Department Chairs must approve any courses that are in the area of your major(s).

7. An Independent Study must result in a paper of substantial length (approximately 40-50 pages for a full unit of credit), except when the faculty reader and the Dean of the Faculty approve a substitute.

8. The student must meet with the faculty reader on a regular basis, and the time for such meetings must be indicated below.

You must attach a full syllabus of the intended program of studies, including a bibliography, course description, and an outline of the research to be completed

Student Name ___________________________________________  ID __________________

Major(s) ___________________________________________  Class __________________

GPA Previous Semester __________  GPA Cumulative _________  Credit Requested Half / Full (circle one)

Short Title of Independent Study ___________________________________________

Faculty Reader ___________________________________________  Name __________________

College __________  Signature __________________

Faculty Phone ___________________________  Faculty Email __________________________________

Meeting days, times and frequency: ___________________________________________

Department Chair Signature (see 6 above) _______________________________________

Student Signature ___________________________________________  Date __________________

Registrar’s Signature ___________________________________________  Date __________________