



Independent Study Request

Independent Study Contract

Independent Course Contract

Name: _____

Student ID #: _____

Term/Year: _____

Level: 599 (Introductory)

Hours to Be Earned: _____

699 (Intermediate)

Prefix (e.g., BS, CS): _____

799 (Advanced)

Please return this form to the Office of the Registrar to complete the registration process.

Reason for the Independent Study: _____

Objectives for the Study: _____

Procedures (Note: Independent Study and Course Contracts are not Correspondence Courses. Be sure to include a description of the means and regularity of faculty-student interaction. Generally, 2 hours of face-to-face contact is expected for each hour of credit for "on-campus" designation): _____

Course Readings (List or attach a bibliography, including ca. 400-500 pages of graduate-level reading per hour to be earned): _____

Project(s) to be Completed/Means of Evaluation (Be specific!): _____

Date for completion of study (Date should fall within the registration term give above): _____

The student shall invest a minimum of 48 hours for each credit hour. Independent study petitions must be submitted by the last day of drop/add for the designated term.

M.Div./M.A. Requirements: the student must have a GPA of at least 2.75 and Middler or M.A. 2 status (25+ hours). The student is limited to 6 hours of Independent Study per degree. (For D.Min./Th.M./D.Miss. - see catalog for requirements.)

For Office Use Only:

Previous Independent Study Hours: _____

CumGPA: _____ Hrs. Earned: _____ Degree: _____

On-campus Format Off-campus Format

Granted Not Granted

Signature _____ Date _____

Signatures

1. Student _____

Date _____

2. Faculty _____

Date _____