



APPLICATION FOR INDEPENDENT STUDY

Application deadline: 1st Semester September 30

2nd Semester February 28

Must be renewed EACH semester

(Policy pertaining to Independent Study may be found in the Program of Studies.)

Student's Name _____ **ID#** _____

Adviser _____

Current Class: FR ☐ SOPH ☐ JR ☐ SR ☐

Teacher/Consultant _____ **Department** _____

School Year for Independent Study: _____

Circle one of the following: Semester 1 ☐ Semester 2 ☐

My other courses are: (not including independent study)

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

Project Title/Problem:

Objectives/Goals:

Description of Final Product:

Describe the procedures you plan to use to achieve your goals:

Beginning Date of Project: _____ **Due Date:** _____

Projected Schedule:

Evaluation Procedure:

Credit to be received: .5 credit

All Independent Study receive a P/NC (Pass/No Credit) grade.

An Independent Study may not be used to satisfy graduation requirements and may not be a subject of interest that is covered in the regular curriculum.

Signatures:

Student _____ Date _____

Teacher/Consultant _____ Date _____

Adviser _____ Date _____

Department Chair _____ Date _____

Please submit this application to the Associate Principal for Academics and Administrative Services, WKA Room 277a.

Associate Principal _____ Date _____

Administrative Use

Scheduler _____ Date _____