

DEPARTMENT OF COMMUNICATION, THEATRE, AND LANGUAGES
INDEPENDENT STUDY PROPOSAL FORM
(FORM MUST BE TYPED AND ATTACHED TO A SCHEDULE CHANGE FORM)

Name: _____ ID Number: _____

Student Classification: _____ Major: _____ Minor: _____

Course Number: _____ Credit Hours: _____ Semester: _____

Faculty under whose name course is listed:

Proposed Teacher:

Is this a request to substitute for another course? Yes No

If yes, which course: Explain reason for request:

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Do you wish this course to count for Graduate credit? Yes No

Students receiving graduate credit must have two (2) faculty committee members in addition to the supervising instructor

Name of Committee Member 1 _____ Name of Committee Member 2 _____

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Project title/Description:

Course Objectives:

Course activities/studies/projects (detailed summary of all work to be completed):

Written Component (be specific):

Oral Component (if applicable):

Specific evaluation and grading procedures (how will the work be evaluated):

Bibliography:

Due dates and completion date:

This proposal along with a Schedule Change Form (Drop/Add Form) must be approved by those faculty listed below and must be presented to the department chair for a final approval no later than two weeks prior to the last date to drop a semester course by the instructor supervising the course.

Supervising Instructor Approval: _____ Date: _____

Advisor Approval: _____ Date: _____
Including approval of course substitution

Instructor of Record Approval: _____ Date: _____

Committee Member Approval: _____ Date: _____
Required for graduate credit only

Committee Member Approval: _____ Date: _____
Required for graduate credit only

Chair Approval: _____ Date: _____

After approval, a photocopy of this proposal will be sent to the student and the instructor of record. The original will be kept in the department files. The instructor of record will place a final grade on this form at the same time final grades are submitted to the Registrar's Office.

Grade Assigned (to be completed by Supervising Instructor): _____

Signature of Supervising Instructor Date

Grade Submitted by Instructor of Record: _____

Signature of Instructor of Record Date