

INDEPENDENT STUDY CERTIFICATION AND CONTRACT

Instructions:

1. Submit a Program Change Form signed by your faculty advisor to the *Center for Student Services* (Lower Level, Nugent Building), adding the course *ISD*999.01*
2. Fully complete and submit this **Independent Study Certification and Contract** to the *Office of Academic Affairs* (8th Floor, Main Building) by the end of the Program Change Period.

SECTION ONE: Independent Study Description

(to be completed by student in consultation with Faculty Sponsor)

Name: _____ Student ID No: _____

Major: _____

Faculty Advisor: _____

Faculty Who Will Supervise the Project: _____

COURSE ASSIGNMENT

Department: _____ LEVEL OF STUDY: 200-level (29X) 300-level (39X)* 400-level (49X)
*(must be at least 300 level for those satisfying upper-level course requirement)

Term/Year: FA JA P SUM I SUM II _____

Number of Credits: _____ (INDEPENDENT STUDIES ARE GENERALLY NOT APPROVED FOR OVER 3 CREDITS)

The regulations of the Commissioner of Education of the State of New York require that for a given semester a minimum of 45 hours of study be completed for each credit earned in addition to at least four regularly scheduled meetings with the faculty sponsor.

Independent Study Course Detail

- 1) Please state why the Independent Study is to be taken.
- 2) List course work and other activities that have prepared the student for this work.
- 3) Describe the theme and scope of the study/project: (IN ADDITION, ATTACH A DETAILED SYLLABUS/OUTLINE AND BIBLIOGRAPHY/READING LIST)
- 4) What will be produced as a record of this independent study, and how will each part be weighted in grading? (E.g., 20 pg final paper, 50%; 10 2pg response papers, 50%)

SECTION TWO: Independent Study Eligibility Criteria

(to be completed by the student and reviewed/signed by the student's Faculty Advisor)

Eligibility Requirements:

The student must have:

- 1) Declared a major MAJOR: _____
- 2) Completed at least 30 credits at MMC TOTAL # OF CREDITS EARNED: _____
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- 3) Achieved a cumulative GPA of at least 3.00 CUMULATIVE GPA: _____

Certification:

(to be completed by the student's Faculty Advisor)

Student Meets Criteria Student Does Not Meet Criteria

I certify that the student, _____ meets the eligibility requirements specified above.

Signature of Faculty Advisor _____ Date _____

Contract

A. Between Student and Faculty Sponsor

I, _____ (print student name), agree that I will conscientiously carry out the responsibilities associated with the Independent Study for which I am registering. I understand that upon successful completion of this Independent Study, I will be evaluated by my faculty sponsor, who will then issue a grade based upon his/her combined evaluation of my work.

Student's Signature _____ Date _____

I, _____ (print faculty sponsor name), agree that I will supervise the Independent Study of the above named student for the duration of the semester; supervision will include at least four regularly scheduled meetings with the student to discuss the progress of the student's research and to review the student's work in all stages through the completion of the project described in the Contract.

Faculty Sponsor's Signature* _____ Date _____

* *Adjunct faculty may not sponsor Independent Studies.*

B. Between Student and Marymount Manhattan College

I, _____ (student), take full responsibility for the completion and submission of my Independent Study Contract by the deadline date for such submission, which is set forth in the most recent MMC course bulletin. I understand that failure to submit the completed and signed Contract on time to the Office of the Associate Dean for Academic Affairs will have the following results:

1. My registration for the Independent Study will be dropped, reducing my credit load, thereby affecting my financial account with the College;
2. My registration for the Independent Study will not be reinstated; and
3. I will be charged a Program Change fee of \$30.00

Student's Signature _____ Date _____

Signature of Division Chair
of Sponsoring Division _____ Date _____

Signature of Associate Dean
for Academic Affairs _____ Date _____