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 STU DY: 200-level (29X)300-level (39X)*
400-level (49X) 400-level/CHP credit (49X-HP01)**
*(must be at least 300 level for those satisfying upper-level course requirement] ** Independent Study Honor Sections require CHP director signature on last page
Term/Year: FA JA SP 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

meets the eligibility
Date
tiously carry out the responsibilities
successful completion of this
based upon his/her combined
Date
supervise the Independent Study of
t four regularly scheduled meetings
nt's work in all stages through the
Date
etion and submission of my
the most recent MMC course
the Office of the Associate Dean fo
ereby affecting my financial account
Date
Date
Date
Date