



# Independent Study Contract

(Use the Licensure Only IS contract for out of state licensure requirements)

**STUDENT INFORMATION**

Student Name:		Date:	
Student ID Number:		Track:	

**CONTRACT INFORMATION**

I, the undersigned, request enrollment in the following Independent Study for the time period:

**Enrollment Type**

Independent Study

Course ID # \_\_\_\_\_ Unit Value \_\_\_\_\_

Title \_\_\_\_\_

Objectives \_\_\_\_\_

**Note: A syllabus is required. Please attach the syllabus.**

Instructor Name \_\_\_\_\_

Due Date \_\_\_\_\_

(the due date may not be later than the quarter end dates noted above)

**Term**

**Year**

Fall  
(10/1-12/31)

\_\_\_\_\_

Winter  
(1/1-3/31)

\_\_\_\_\_

Spring  
(4/1-6/30)

\_\_\_\_\_

Summer  
(7/1-9/30)

\_\_\_\_\_

A student contracts with an instructor for a three month period (coincides with the calendar quarter dates noted above) to complete course requirements.

Submit the contract to instructor for signature before beginning the Independent Study. The instructor will attach a syllabus and submit the contract to the Program Chair, who, if approved, will sign and forward to the Registrar.

**Independent Study Contracts must be approved and signed by the Program Chair.** Student to submit IS coursework and IS grade change form to the instructor by the due date.

The student is charged a per unit tuition for the course. The student is considered enrolled while taking an independent study.

**Required Signatures:**

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Instructor Date

\_\_\_\_\_  
Program Chair Date

\_\_\_\_\_  
Registrar Date

\_\_\_\_\_  
Student Accounts Office Date

New Course \_\_\_\_\_ Retake \_\_\_\_\_ (original year/term) Passed Prereq \_\_\_\_\_  
Revised 6/2018