

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 Term/Year indicated:					
Enrollment Type				Term	Year
☐ Independent Study				Fall (10/1-12/31)	
Course ID # Unit Value					
Title				Winter (1/1-3/31)	
Objectives				Spring	
				(4/1-6/30)	
Note: A syllabus is required. Please attach the syllabus.				Summer	
Instructor Name				(7/1-9/30)	
Coursework Due Date					
(the due date may not be later than the quarter end dates noted above) A student contracts with an instructor for a three month					
	e calendar quarter dates noted	Required Sign	natures:		
All course information ar instructor, Chair) are requestional Registrar's Office.	nd signatures (student, uired prior to submitting to the	Student		Date	
Independent Study Consigned by the Program	atracts must be approved and	Instructor			Date
1) Submit the contract to beginning the Independent	instructor for signature before nt Study.	Program Chair			Date
2) The instructor will attach a syllabus and submit the contract to the Program Chair. sign and					
3) The Program Chair must approve, sign and forward to the Registrar's Office.					Date
4) Student to submit IS coursework and IS Grade Form to the instructor by the due date. The student is charged a per unit tuition for the course. A Student Accounts Office			s Office		Date
	sessed for forms submitted after	New Course Retake (original year/term) Passed Prereq Confirmed with AP RO rcvd date/assess late reg fee			
The student is considered enrolled while taking an independent study.				autorassess rate i	~