Graduate Studies Independent Study Proposal, Course Creation, and Registration Form

** Independent Study is NOT available to Non-Degree students**

Please use this form, effective for the Fall 2024

Independent study opportunities are available to students in the fall and spring semesters and refer to individualized instruction, which is provided in a tutorial manner outside of a regularly offered class schedule. Participating students work with their sponsoring faculty member to create a course of study and learning outcomes for the independent study and sign an Independent Study Agreement Form to adhere to these learning outcomes. The faculty member assigns the credit value to the course based upon the anticipated learning outcomes and scope of work required during the course of the study.

Part I: Student Information
(to be completed by student)

Name_____ID#_____

Major Department_____Degree Program *(circle one)* MA   MPS   MFA

This Independent Study will be pursued in the: ___Fall 20___ OR ___ Spring 20___
<p style="text-align:center">(check one)</p>

Have you ever completed an Independent Study in a previous semester in this degree program?
___Yes   ___No   If so, when? _____

Forms are due in the Dean's office by December 1st for Spring and May 1st for Fall.

Part II: Intent of Study
(to be completed by student with consultation from Faculty)

You may use the space below or attach additional sheets, if needed.

1. **Number of Credits:** Please keep in mind that one credit for independent study will be awarded for the equivalent of forty-five 50-minute sessions of student academic activity. *(from SUNY's credit/contact hour policy for independent study)*

   - 1 credit= 45 hours
   - 2 credit = 90 hours
   - 3 credit = 135 hours
   - Number of credits for this IS course:_____

2. **Course Description:**

3. **Independent Study Learning Outcomes:** *(See guidelines at http://www.fitnyc.edu/cet/resources/syllabus-outcomes.php)*

   Upon completion of this independent study course, student will be able to:
   -
   -
   -

4. **Reading or texts**

5. **Grading Method/Evaluation:** *(with percentages; must total 100%).*

6. Units/Weeks of Study and hours:

7. Unit Descriptions: *(Please attach in detail what topics will be covered in each unit or week. Specific assignments are not necessary unless they aid in understanding the unit).*

8. Bibliography (See citation styles here: https://www.fitnyc.edu/writing-studio/guides/citing.php

9. Other notes regarding Independent Study course: (optional; *please attach another sheet if necessary*)

Part III: Course Information
(to be completed by instructor responsible for the section)

Please provide the course details below (The Registrar's Office will build the section for this student, per your approval):

Subject: _____

Course *(circle one)*: 592   692

Independent Study Title *(ex: Indep Std: Hats of the 1920s)*: _____

Credits *(Range: 1.0 – 3.0)*: _____

Course Description:
(use additional sheet if needed)

Instructor Signature: _____   Date:_____

Instructor ID#: _____

Part IV: Registration Details
(to be completed by student)

I, _____, hereby elect to enroll in the following Independent Study Course and have obtained the proper permissions from the course instructor, Department Chair, and School Dean. I understand that once registered, standard tuition and fees will be applied.

I understand if I register and do not attend, or fail to complete the coursework, I will be responsible for payment of tuition of fees.

I agree to withdraw from Independent Study by deadline posted in the academic calendar if my instructor has determined I have not made sufficient progress towards completing my project in that amount of time. I understand that a grade of "Incomplete" is not approved for Independent Study.

Student's Signature: _____   Date: _____

Part V: Required Signatures

Please obtain the following required permissions:

Department Chair:_____Date:_____

School Dean: _____ Date: _____

** The Dean's Office should then return this form to the Registrar's Office, Feldman-158, wherein your registration shall be processed **

Registrar's Office Use Only:

Date of section creation: _____
Section Number: _____
CRN: _____
Registration Processed By: _____
Date: _____

Registrar's Office:
Return copies to Dean, Chair, and Instructor upon course section creation and registration
Scan copy for file