## KANSAS WESLEYAN UNIVERSITY

Office of the Registrar PH285, 100 E. Claflin, Salina, KS 67401

**Telephone**: (785) 833-4318 **FAX**: (785) 404-1485 **E-mail**: kdubhub@kwu.edu

## APPLICATION FOR REGISTRATION IN INDEPENDENT STUDY

(A fee of \$75.00 per credit hour is charged in addition to all other tuition charges for the course)

Independent study allows students to pursue research, readings, or other scholarly investigation or creative work for course credit. The program allows students to pursue studies which cut across departmental and divisional lines or to do work in a specific department in which work is not offered in the catalog courses. It provides opportunities for individual academic performance, emphasizes the personal relationship of instructor and student, encourages creativity, and enables the student to work in areas outside the formal academic fields of study. A fee of \$75 per credit hour in addition to all other tuition charges for the course is assessed.

## Requirements for an Independent Study:

Note: Attach additional pages if necessary.

- The program is open to all degree-seeking undergraduate students except first semester freshmen.
- An Independent study may not constitute more than one-half the student's credit hour load for any semester.
- An Independent Study cannot be used to substitute for material offered in a regular departmental or divisional course.
- Faculty may not instruct more than two non-scheduled course and/or Independent Study sections in a given academic year. Adjunct faculty are not
  normally assigned non-scheduled courses or Independent Studies. Exceptions to faculty requirements may be made at the discretion of the Executive
  Vice President/Provost.
- A complete Application for Registration in an Independent Study must be submitted to the Office of the Registrar before the last day of regular class
  in the prior term as listed in the Academic Calendar.
  - A syllabus for the course must be enclosed with the Application and presented to the student.
  - The application must be approved by the instructor, advisor, faculty committee members, and Executive Vice President/Provost and must be signed by the student and the Office of the Registrar.
  - A description of the frequency and form of faculty student contact must be included (tentative schedule).
- The independent study must provide a rigorous academic experience equivalent to that of any other 400 level courses at KWU. The student will be required to submit periodic progress reports.
- At the conclusion of the study the instructor and faculty committee members will evaluate the work associated with the independent study and assign a grade. A project evaluation form containing the student information, type of project, location of the project (library, art gallery, etc.), a summary, the basis of evaluation, the final grade, and signatures from the instructor and faculty committee members must be filed with the Office of the Registrar before the last day of regular class for the semester or term as listed in the Academic Calendar for review by the Executive Vice President/Provost.

Student's Name:	Student ID:	Date:	
Title of Study:	# Credit Hours:	Course #:	490
Instructor Name (please print):			
Semester/year study is to be done (e	e.g. Fall 2020):		
Note: Independent Study must be comple	eted no later than the last date of the semester.		
Faculty Committee Members (ple	ase print)		
(optional)			
Student's reason for request:			

Revised: July 20, 2017

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Tentative Schedule (frequency of faculty/student contact):				
Note: Attach additional information i	f necessary.			
<u>SIGNATURES</u>				
Student:		Date:		
Note: Student should obtain <u>ALL</u> the si	ignatures below and submit	to the Registrar's Office		
Instructor:		Date:		
Note: Course description and syllabus	must be attached.	Date.		
, ,				
Faculty Committee Member 1:		Date:		
Faculty Committee Member 2:		Date:		
Advisor:		Date:		
Additional comments				
(000 11 0 1)				
(Office Use Only)				
Office of the Registron		SUPPORTED	☐ NOT SUPPORTED	
Office of the Registrar	Date			
		APPROVED	☐ NOT APPROVED	
Provost	Date			
Comments:				