Request for Independent Study or Semester Overload

Instructions: Use this form to request an independent study or to register for more than 18 credits in a semester. Minimum requirements for approval are junior/senior status and a 3.0 GPA. A registration form must accompany this form for the registration to be processed.

Name ____________________________
Address ____________________________
___________________________________
Home Phone __________________________
Alt/Cell Phone _________________________
Email _______________________________

ID # ____________________________

Current GPA ___________
Total Credits Earned _________
Request is for
○ Fall  ○ Spring  ○ Summer
Year ________

○ Request for INDEPENDENT STUDY
Course Number and Title __________________________
Instructor ____________________________ Credit Hours ________
Projected Completion Date __________________________

Specify why you are making this request:
(Indicate the reason request is necessary)

Indicate what arrangements have been made so you can successfully complete this request:
(Independent Study: Indicate the Instructor arranged to tutor the course, meeting times and attach course syllabus)
(Course Overload: Indicate how you can successfully manage the increased demands of the requested overload)

Student Signature ____________________________ Date ______________

Instructor Approval ____________________________ Date ______________

Students are charged an additional fee for an independent study ○ Check to waive fee

Advisor Approval ____________________________ Date ______________

Department Chair Approval ____________________________ Date ______________

School Dean Approval ____________________________ Date ______________

Chief Academic Officer Approval ____________________________ Date ______________

Required for overload

Recorded by Registrar ____________________________ Date ______________