*Fill out this form electronically, obtain signatures, and submit the complete form to the Registrar’s Office (*[*registrarsoffice@houghton.edu*](mailto:registrarsoffice@houghton.edu) *or drop off at the Registrar’s Office).* You ***must*** read carefully and comply with the [Independent Study Procedures](https://www.houghton.edu/wp-content/uploads/2019/02/independent-study-procedures-1.pdf). **Minimum GPA required: 2.75**

***This form is due the semester prior to the semester of study (or April 1 for Summer).***

**Name:**   **CWID:**

**Session:**  Choose an item. **Year:**  Choose an item.

**Subject Prefix:**   **GPA:**   **Credit Hrs** (for independent study)**:**

**Title of study:**

*For office use only:* Course ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instructor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*Steps 1-8 not required for Independent Studies preliminary to an approved Honors Project.)*

1. What is the specific area for your study? Click or tap here to enter text.
2. What are the specific objectives of this study? Click or tap here to enter text.
3. How will this Independent Study benefit your academic plans? Include relevant information if you are planning to have this meet a specific requirement in your major, minor or concentration. Click or tap here to enter text.

1. Describe the stages of your study: how you will start it, what will be the sequence of stages, and how much time will be spent in each stage. **Include a proposed reading list with an estimate of total pages to be read**.

Click or tap here to enter text.

1. What previous work have you had to prepare for this study? Click or tap here to enter text.
2. Specifically, how will you and your instructor work together? Click or tap here to enter text.
3. What will be the concrete end-product of this Independent Study (including target number of typed pages)?

Click or tap here to enter text.

1. How will the work of your study and the quality of the product be evaluated? Click or tap here to enter text.

Student Signature: Click or tap here to enter text. Date: Click or tap to enter a date.

**For the instructor** – Comment on this proposed study and its evaluation: Click or tap here to enter text.

Instructor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

***Area Dean recommendation for course level:***  19X 29X 39X 49X (**not acceptable without a level)**

Area Dean Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provost Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_