

FALL & SPRING SEMESTER TUTORIAL/INDEPENDENT STUDY REQUEST

Student Name _____ ID# _____ Box # _____

Check one:

I request a Tutorial (a course which is published, part of the regular WPC curriculum, and required for the student's major program). *Tutorials are normally available only when circumstances prevent the student from enrolling in the course at the next regularly scheduled time.*

I request an Independent Study (a specially designed course, which is *not* part of the regular, published curriculum). *Independent Study is normally available only to junior, senior, and post-baccalaureate students who are regularly enrolled students of the College.*

Course	Number*	Course Title	Credits

* Independent Study courses are numbered 205, 305, 405, or 505.

Term Enrolled _____ Advisor _____

Instructor Name _____

To the Student: You are responsible for completing this form and for carrying it through steps 1-4.

1. Instructor Approval.

(For Tutorial): *I certify that the student has satisfactorily demonstrated the mitigating circumstances which prevent enrolling for the course when it is regularly offered. I also certify that my load permits the addition of this course.*

(For Independent Study): *I certify that the content of this Independent Study is amenable to being taught independently outside the classroom. I also certify that my load permits the addition of this course.*

(For Both): *I certify that a syllabus and/or study agreement delineating course objectives, all required activities, and bases for evaluation and assignment of grades will be on file in the Office of Academic Affairs by the second week of the semester and that the conditions listed above have been met.*

Instructor Signature _____ Date _____

2. Computation of Charges[†].

Number of credits _____ X \$ _____/credit hour = \$ _____
 (Tutorial/Independent Study Rate) TUTORIAL Fee

[†] **Please Note:** *The tutorial/independent study fee is calculated by multiplying the number of credits by the rate identified in the current college catalog. This fee may not be waived, including in cases of tuition remission.*

I understand and acknowledge these fees and charges: _____
Student Initial

3. Department Chair Approval: *I have reviewed the circumstances related to this request as well as the implications it has on the instructor's load and grant my approval for the tutorial/independent study request.*

Department Chair Signature _____ Date _____

4. Form Submission: *Deliver completed form to the Records Office along with a Registration or Add Form (as appropriate).*

REGISTRATION FOR THIS CLASS IS NOT COMPLETE UNTIL THE RECORDS OFFICE RECEIVES THIS FORM.

FOR OFFICE USE: Fee Verification and Registration

Course No. Created _____ - _____ - _____ Fee to be Charged: \$ _____ Initials _____

Form Distribution: Records (Original) Instructor Student Financial Services Academic Affairs Business & Finance