



DIRECTED or INDEPENDENT STUDY REQUEST

Student Name _____ ID# _____ Box # _____

To the Student: You are responsible for completing this form and for carrying it through all FIVE steps listed below.

Step 1. Student Request (check one)

I request a **Directed Study** (a course which is published, part of the regular WP curriculum, and required for the student's major program). *Directed Study is 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, numbered 205, 305, 405, or 505). *Independent Study is normally available only to junior, senior, and post-baccalaureate students who are regularly enrolled students of the University.*

Term	Subject	Number	Course Title	Credits

The reason that I am requesting this course is the following: _____

Step 2. Instructor Approval & Certification (check one)

For Directed Study: I certify that the student has demonstrated to my satisfaction the mitigating circumstances which prevent enrolling for the course when it is regularly offered.

For Independent Study: I certify that the content of this Independent Study is amenable to being taught independently outside the classroom.

Instructor Name _____

Instructor Signature _____ Date _____

Step 3. Department Chair Approval & Certification (check all)

- I certify that the conditions listed above have been met.
- I certify that the instructor's load permits the addition of this course.
- 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.

Department Signature _____ Date _____

Step 4. Arrange for Fees or for Fee Waiver

I understand that I will be charged the following Directed/Independent Study Fee *in addition* to the regular tuition charges.

Number of Credits _____ X \$ _____/Fee per Credit Hour = \$ _____ Total Fee

Student Signature _____ Date _____

Under rare circumstances, the Vice President for Academic Administration (VPAA) may approve a fee waiver for a Directed Study course. Please inquire at the Records Office regarding the fee waiver petition form.

5. Deliver entire form to the Records Office with Registration or Add form (as appropriate). All signatures must be completed in order for the Records Office to accept the form and register the class.

FOR OFFICE USE: Course Number: _____ Initials _____

Original: Records Office Copy: Business Office Copy: Instructor Copy: Finance Office Copy: Academic Affairs Office