



Effective August 4, 2023

### **Instructions for Individualized Instruction and Independent Study**

#### **Individualized Instruction:**

The content, requirements, and standards of tutorial shall be the same as those of the corresponding course. Individualized instruction allows a student to take an unscheduled course required for completion of a program of study. The course must not be offered in the current semester and will not be offered again prior to the student's graduation. A student seeking individualized instruction may initiate the request by completing this form obtained from the "Registrar" website, after preliminary discussions with both the advisor and instructor. Please note that students should submit this request only after exhausting such options as (1) a substitution by the department, (2) a waiver by the department and dean, and (3) taking a similar course at another institution. Justification is required.

#### **Independent Study:**

It provides the opportunity to a student for a unique academic experience otherwise not available through regular curricular offerings. It should not be confused with cooperative or internship courses which provide job experience. Approval of independent study proposals are extremely limited.

Only those with justifications which show the greatest benefit to the student will be considered. The procedure for an independent study request is similar to individualized instruction, except that a project description must be composed by the student and submitted along with this form. The project description shall outline the intended project and include such details as resources available, methods employed, and conclusions or benefits anticipated.

In the case of a student requesting permission for study in an inter-departmental curriculum, the student should seek the approval of the department chair of the faculty member supervising the course.

Neither the department chair nor the dean will approve a request which attempts to compensate for an inadequately planned schedule.

#### **Process:**

- Department Chair inquires to Dean about course being offered in II/IS format (Faculty member has been identified by chair and is willing to teach II/IS).
  - Department Chair completes and submits [form](#) to Dean/Associate Dean.
- Upon approval of Dean/Associate Dean, Dean's Office AA builds the course in Banner inclusive of workload and payment.
- Dean's Office AA completes [form](#) and uploads in BDM (Banner Document Management) after obtaining signatures so it is part of the students record.
- Dean's Office AA direct registers and notifies student.

## Individualized Instruction/Independent Study Application



**Student ID:** \_\_\_\_\_ **Level:** Undergraduate \_\_\_\_\_ Graduate \_\_\_\_\_

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Term - Select One:** Fall 20 \_\_\_\_\_ Winter 20 \_\_\_\_\_ Spring 20 \_\_\_\_\_ Summer 20 \_\_\_\_\_

**Registered credit hours for selected term:** \_\_\_\_\_ **Total earned credit hours:** \_\_\_\_\_

**Expected Graduate Date:** \_\_\_\_\_

**Individualized Instruction** ☐ **Independent Study** ☐

Course Subject	Course Number	Course Title	Credit Hours
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**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Attach your degree Works Audit for this applicant)

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### To be completed by Department Chair:

Last time course was offered: \_\_\_\_\_

Is this course required for graduation? Yes \_\_\_\_\_ No \_\_\_\_\_

Will the course be offered before the student's expected graduation date? Yes \_\_\_\_\_ No \_\_\_\_\_

Are there suitable substitutions for the course? Yes \_\_\_\_\_ No \_\_\_\_\_

Instructor of the course: \_\_\_\_\_

Why is this course needed as an individualized instruction this semester?

### Department Chairperson and Dean Signatures:

(Per CBA Article 26.B.5: Management will not approve nor shall a faculty member accept students for more than (9) workload hours of individualized instruction per semester/session.)

### The signature below reflects approval and compliance with the CBA:

\_\_\_\_\_  
Assigned Faculty's Name (Please Print)

\_\_\_\_\_  
Faculty Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chairperson Name (Please Print)

\_\_\_\_\_  
Department Chairperson Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean Name (Please Print)

\_\_\_\_\_  
Dean Signature

\_\_\_\_\_  
Date

### To be complete by Dean's Administrative Assistant:

CRN #: \_\_\_\_\_ Date Course Built \_\_\_\_\_ Date Student Registered \_\_\_\_\_