APPLICATION FOR
INDEPENDENT STUDY OR DIRECTED STUDY

Check one:

☐ Independent study - designed for students who must complete a specific BSU course as part of their program requirements. Students will work independently to fulfill all course requirements as outlined in the BSU catalog and as specified by the faculty supervisor.

☐ Directed study (499 or 503) – designed to permit student to pursue an interest beyond a defined BSU course. A Directed Study does not duplicate any BSU course or material studied in any required or elective course; nor is it an internship or research course. This undertaking involves independent thinking, hard work and creativity along with the guidance and help of a faculty member, resulting in a paper or project as agreed upon with the faculty. Each directed study may be no more than three credits, and no more than six credits in directed study may be applied to graduation requirements. Open to degree-seeking undergraduate students in their junior or senior year and to degree-seeking graduate students only.

See the current catalog section “Academic Policies” for more information.

This completed form must be submitted to the Registrar’s Office by the last day of the drop/add period for the semester or term.

To be completed by the student – PLEASE PRINT:

NAME_______________________________________ MAJOR(S)_______________________________________

BANNER ID#_______________________________________ MINOR(S)_______________________________________

CLASS/LEVEL: ___JR  ___SR  ___Graduate Student  E-MAIL________________________________________________

YEAR: _______ SEMESTER (Check one):  ____Fall  ____Spring  ____Summer I  ____Summer II  ____Summer 10 Week  ____Full Year (Sept-May)  ____Odd Date (specify start and end dates)____________________________________

COURSE PREFIX:  4-Letter Course Department Code (ex. PSYC)________________________________________

COURSE NUMBER:  for Independent Study, enter specific course number ________________________________

for Directed Study, select level:  _______ 499 (Undergraduate)  _______ 503 (Graduate)

STUDENT SIGNATURE_______________________________________ DATE ________________________________

COMPLETED FORM MUST INCLUDE AUTHORIZING SIGNATURES ON PAGE 2.
FOR DIRECTED STUDY ONLY, this section is to be completed by the student and faculty supervisor:

SUMMARY “TITLE” of Proposed Directed Study __________________________________________________

TOTAL CREDIT HOURS*: _____ 3 credits _____ 2 credits _____ 1.5 credits _____ 1 credit

*A maximum of 6 credits in directed study may be applied to graduation requirements

DESCRIPTION OF DIRECTED STUDY PROPOSAL: Please provide a brief description of the proposed project which should include the goals, action plan and grading methods.

GOALS: ____________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

ACTION PLAN: ________________________________________________________

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____________________________________________________________________

GRADING: ____________________________________________________________

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________________________________________________________DATE__________

NAME OF FACULTY SUPERVISOR (PLEASE PRINT) ___________________________________________________________

________________________________________________________DATE__________

DEPT. CHAIR of PROJECT SIGNATURE ________________________________ DATE__________

COLLEGE DEAN SIGNATURE _________________________________________ DATE ____________

Authorization Signature