INDEPENDENT SCHOLARSHIP/STUDY PROGRAM

AUGUSTANA UNIVERSITY REGISTRAR'S OFFICE

FIRST NAME: _____ LAST NAME: _____

AUGIE ID: _____ EMAIL: _____ @ole.augie.edu

TERM: _____ YEAR: _____ CURRENT REGISTERED CREDIT HOURS: _____

This form is due within 2 weeks of the start of the Fall or Spring term, or by the 5th day of class of Interim or Summer.

INDEPENDENT SCHOLARSHIP

If a student cannot take a regular catalog course when it is offered, with permission of the department involved, the student may complete a course through an independent scholarship. An independent scholarship uses the same number as the catalog course. Independent scholarships include **HONORS THESES** and **SENIOR SEMINARS**.

CATALOG COURSE NUMBER: _____

CATALOG COURSE NAME: _____

Attach the syllabus for this class to this form.

INDEPENDENT STUDY

Departments in the University may offer independent study courses to be completed through self-directed study. Course numbers are chosen depending on the level of study and must be numbered using the convention below.

DEPARTMENT (Prefix): _____ GRADE TYPE (Circle one): **Letter Grade** **S/U**

STUDY LEVEL (Circle one): **1999** **2999** **3999** **4999** **5999** **6999** CREDIT HOURS (1-4): _____

DESCRIPTIVE TITLE (Optional): _____

Attach responses for the following learning objectives to this form.

Answers to the following questions (TO BE COMPLETED WITH THE INSTRUCTOR OF THE INDEPENDENT STUDY) provide a learning contract describing the knowledge to be gained (objective), the process the student will use to complete the objectives (activities), and the evaluation system to be used by the instructor in assigning the grade.

1. **Outcomes of Student Learning**: List specifically what the student will/should be able to do/know at the end of the independent project.
2. **Activities**: List specific activities that the student will do that will enable them to accomplish the outcomes listed above.
3. **Evaluation/Assessment**: List specifically how the student learning outcomes listed above will be measured.
4. **Materials**: List specifically all the material (print, non-print, laboratory and so on) to be used in the project.

Required Signatures

Student: _____ Date: _____

Advisor: _____ Advisor (printed): _____ Date: _____

IS Instructor: _____ IS Instructor (printed): _____ Date: _____

Registrar: _____ Date: _____

Completed forms can be scanned and emailed to registrar@augie.edu along with the syllabus/learning outcomes.