

SHIPPENSBURG UNIVERSITY
REQUEST FOR INDIVIDUALIZED INSTRUCTION OR INDEPENDENT STUDY
INSTRUCTIONS

You must be in good academic standing to apply for individualized instruction or independent study. The course may not be used to repeat or replace a course in which a grade of "D" or "F" was earned. To apply, you must first find a faculty member who is willing to work with you on an individual basis. Complete Part I of this form and have the faculty member submit it for approval. A syllabus must be attached showing course requirements, tentative schedule, and method of evaluation to be used. **This form will not be processed without a syllabus.**

Individualized instruction-when you need to take a regular course during a semester in which the course is not offered. These courses are generally restricted to students who have completed a substantial portion of their degree program and who need the particular course to complete their degree requirements.

Independent study-must include some new experience of inquiry, evaluation, and/or creative activity. This experience must be one which is not available through an established course, including individualized instruction.

PART I (to be filled out by student and signed by advisor or department chair):

Student Name: _____ SU ID #: _____ SU email: _____

Undergraduate Graduate Major: _____

Year: _____ Fall Spring Summer A Summer B Winter

Please provide detailed justification for request: _____

Student's Signature: _____ **Date:** _____

Advisor/Chair Signature: _____ **Date:** _____

PART II (to be filled out by department and college offering the course):

Requesting (check one): Independent Study Individualized Instruction

_____ Number of Credits: _____ Has the course already been taken? _____
(Course number and title) Yes No Grade

Syllabus attached (_____) (_____) **Date:** _____
(Faculty Member Print) (Faculty Member Signature)

If the student has not met the restriction or pre-requisite associated with this course an override may be granted.
Yes No

Student is currently registered for how many credits? _____

Approved Denied _____ **Date:** _____
(Department Chair's Signature)

Authorization to raise max credits to: _____

Authorization granted to repeat previous grade of D/F course by College Dean

Approved Denied _____ **Date:** _____
(College Dean's Signature)

Authorization granted to repeat previous grade of D/F course by Graduate Dean/Associate Provost

Approved Denied _____ **Date:** _____
(Graduate Dean/Associate Provost)

Course Code: _____ Entered by: _____ **Date:** _____