



**OFFICE OF THE REGISTRAR**

711 KNOX ROAD | PO BOX 607 | EAST AURORA NY 14052-0607  
(716) 655 7081 | F (716) 652 8903 | **CKS.EDU**

# INDEPENDENT STUDY REGISTRATION FORM

Independent study courses are drawn up by special arrangement between a student and faculty member and must have the approval of the academic dean. Students must submit an Independent Study Registration Form to the registrar's office prior to the end of drop/add week (see academic calendar).

### Restrictions

1. A student may only work on one independent study project per semester.
2. A student is limited to register for no more than three (3) independent study courses, for a total of not more than nine (9) credits, within the duration of a degree program.

**SEMESTER:**

Fall  Spring  Summer Year: \_\_\_\_\_

Name \_\_\_\_\_

### Previous independent study projects:

Title#	Supervising Faculty Member	Semester/Year
1.		
2.		

### Independent Study Proposal

Proposed course title: \_\_\_\_\_

Credit hours: \_\_\_\_\_ Subject/concentration area: \_\_\_\_\_

Supervising faculty member: \_\_\_\_\_

### Terms of the study contract:

1. Number of meetings: \_\_\_\_\_ Method of meetings:  Weekly  Bi-weekly  Monthly  Other:

2. The outcome to be attained: \_\_\_\_\_

3. Data to be researched:

4. Amount of readings (or other research) per week (*bibliography may be attached to this form*):

5. Theoretical research paper/project (*describe*):

6. Pastoral research paper/project (*describe*):

7. Examinations (type and frequency) or other evaluation:

8. Other terms:

**Due Date:** \_\_\_\_\_

Due date should not be scheduled past the last day to submit grades for the semester (see academic calendar).

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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**OFFICE USE ONLY**

Date received in registrar's office: \_\_\_\_\_

Independent Study Project :  Approved  Denied (reason): \_\_\_\_\_

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Date received from professor

\_\_\_\_\_  
Date processed

\_\_\_\_\_  
Date grade report sent