

Independent Study Student Project Agreement

The student who wishes to enroll in an Independent Study completes the items below and, in turn, requests a full-time member of the faculty to supervise the project. Upon the approval of the faculty member, both the department chairperson and the academic dean must concur. When all signatures have been secured, the Registrar is permitted to officially enroll the student in an Independent Study provided such has been completed on or before the close of the Drop/Add period for that term.

Name_		Date
Rowan	ID	Major
# Credits of Independent Study Undergrad or Graduate Course Semester of Independent Study: Fall 20, Spring 20, Summer 20, Winter 20 (This information must be complete before Independent Study section will be created and the student registered.)		
I.	Statement of Student: A. What do you propo	ose to do?
	B. What goals do you	expect to achieve?
II.	Statement of Faculty A	dvisor:
III.	Signatures:	
Date		Student
Date		Faculty Member (please print)
Date		Faculty Member (signature)
Date		Department Head or Chairperson
Date		Academic Dean
Date		Registrar
Date		Bursar(if after billing period)
Date		(ii aiter billing period) Registrar

IMPORTANT: Upon obtaining signature of Academic Dean, this form MUST be delivered **BY THE STUDENT**, **IN-PERSON** to the Registrar's Office for registration and (if applicable) Bursar's signature.

(if after billing period)