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________________________________          Area of Study_______________
Major________________________________          # Credits (Indep.Study)_____
Semester Effective: Fall 20____, Spring 20____, Summer 20____
Undergrad_____ or Graduate______ Course

I. Statement of Student:
   A. What do you propose to do?

   B. What goals do you expect to achieve?

II. Statement of Faculty Advisor:

III. Signatures:
   Date_________________ Student______________________________________
   Date_________________ Faculty Member (please print)____________________
   Date_________________ Faculty Member (signature)_______________________
   Date_________________ Dept. Chairperson_____________________________
   Date_________________ Academic Dean_______________________________
   Date_________________ Registrar_____________________________________
   Date_________________ Bursar________________________________________
   (if after billing period)
   Date_________________ Registrar_____________________________________
   (if after billing period)

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.