**LINCOLN MEMORIAL UNIVERSITY**

**INDEPENDENT STUDY REQUEST**

The Independent Study is a format allowing the student to engage in structured, approved learning for course credit beyond the established curriculum. It is conducted on a one-to-one basis between the student and a faculty supervisor of the study. The IS course is designed by the student in conjunction with a proposed faculty supervisor of the study. The student must not begin work on this IS until all approvals are obtained. All items must be completed by the individuals listed. Offering the course as an Independent Study is subject to all guidelines as published in the current Undergraduate Catalog and the Faculty/Staff Policy Manual.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student I.D.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Declared baccalaureate major/minor program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed course: \_\_\_\_\_\_\_, 196, 296, 396, 496 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_

 Prefix Title Cr. Hrs.

Academic Dept. offering course:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Academic Advisor\_\_\_\_\_\_\_\_\_\_\_

Proposed Faculty Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Authority to assign a willing faculty supervisor rests with the academic department offering the course.)

Semester for initiation and completion of the course:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student classification effective the above semester:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Justification of this proposed Independent Study course:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

With the student’s signature below, he/she: (1) confirms awareness of and compliance with all current criteria and policies relating to Independent Study at LMU and (2) agrees to comply with the requirements and details appearing in the attached course syllabus and any conditions or stipulations which may be added by appropriate personnel prior to affixing their signatures of approval (see reverse side).

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Student

Student’s mailing address for notification of action regarding this request.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date submitted to Chair of Academic Department offering the course:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENTS, PLEASE NOTE: **There is a $25.00 fee (in addition to the regular tuition assessed) for all Independent Study Courses.**

(Continued on other side)

SELECTED CRITERIA CHECKLIST

To be initialed as confirmation by the personnel indicated.

ACADEMIC ADVISOR

\_\_\_\_\_\_\_\_\_\_\_1. This course will not be applied toward fulfillment of baccalaureate core curricula requirements.

\_\_\_\_\_\_\_\_\_\_2 . The student has attained Junior or Senior classification in a baccalaureate degree program and has

 a 3.00 or higher cumulative grade point average.

\_\_\_\_\_\_\_\_\_\_\_3 . The student is seeking approval of no more than one Independent Study course during the semester

indicated.

\_\_\_\_\_\_\_\_\_\_\_4 . If this course is approved as Independent Study and successfully completed by the student, he/she

 will not exceed the limit of six (6) semester credit hours of Independent Study applicable to

 fulfillment of degree requirements.

\_\_\_\_\_\_\_\_\_\_\_5. The student has been apprised of all current criteria and policies relating to Independent Study at

LMU.

PROPOSED INSTRUCTOR

\_\_\_\_\_\_\_\_\_\_\_7. Attached is the course syllabus, adapted as necessary to the Independent Study process.

 The syllabus was developed according to guidelines in the current Faculty/Staff Policy Manual.

 The independent study will be a research-oriented course.

\_\_\_\_\_\_\_\_\_\_\_8. The student must meet with the assigned faculty supervisor within the first three (3) class days of

 the semester (within the first two (2) class days of summer term) to begin the IS course.

\_\_\_\_\_\_\_\_\_\_\_9. The approved faculty supervisor must retain all work and examinations for one year.

ADDITIONAL CONDITIONS OR STIPULATIONS (IF ANY)

SIGNATURES INDICATING APPROVAL

Proposed Instructor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assigned Acad. Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chair of Acad. Dept. offering the course \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Dean \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President of Academic Affairs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APPROVAL OF INDEPENDENT STUDY IS SUBJECT TO AVAILABILITY OF FUNDS

Rev. 12/2020