

INDEPENDENT STUDY APPROVAL

MaineStreet ID #: _____
(7 digits)

Date: _____

Student Name: (please print) _____
Last First M

Independent Study Course Information:

CRN	Course #	Title	Credits
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Check one: Fall Spring Summer

Your proposal for an Independent Study Project must address **each** of these five topics:

1. **Learning Objectives:** What will you learn to do, know, or understand as an outcome of this project?
2. **Activities:** What will you do? Be specific, indicating what you will observe, measure, perform, etc.
3. **Resources:** What will you need for the project? Include bibliography, people, agencies, budget and equipment.
4. **Evaluation:** What will you produce or perform which your faculty sponsor will evaluate for a final grade? How frequently will you confer with your faculty sponsor?
5. **Preparedness:** How can you verify your capacity to carry out this project? Include instruction, experience and ambition.

Student Name (PRINT)

Student Signature

Instructor Name (PRINT)

Instructor Signature for Approval

Dept. Chair Name (where course offered) (PRINT)

Department Chair Signature for Approval

Copy: Diane Hoyt, Registration & Scheduling Services, 107 Bailey Hall, Gorham, ME, Fax: 780-5517