



# Independent Study Proposal

This form is not to be used for an existing course. For existing KC courses please use the Directed Study form. The student must complete this form. Independent study proposals must be approved and submitted to the Registrar's Office prior to the last day to add a course for the requested semester or term.

### Student Section:

Student Name: \_\_\_\_\_ ID: \_\_\_\_\_  
Please Print Clearly

Course Title and Level: \_\_\_\_\_  
Registrar will assign course number. Title must be 30 characters or less and will be transcribed exactly as written.

Narrative description of the project (100-150 words). Attach separate, typed sheet.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Instructor's Section:

The instructor determines whether or not the student is capable of pursuing the proposed Independent Study.

Instructor Name: \_\_\_\_\_  
Please Print Clearly

Credit Hour Value: \_\_\_\_\_ Grading Basis:  Letter Grade  Pass/Fail

Required Text/Course Materials: \_\_\_\_\_

Describe the basis and criteria for the evaluation of this project: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Department Chair Section:

Approve  Deny Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### VPAA Section:

Approve  Deny Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received

Initials

Date Processed

**Registrar's Office ■ One College Green ■ P.O. Box 50 ■ La Plume, PA 18440-0200 ■ (570) 945-8224 ■ [registrar@keystone.edu](mailto:registrar@keystone.edu)**

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