

SAINT MARY'S COLLEGE OF CALIFORNIA

INDEPENDENT STUDY PETITION

This petition is to be filed with the Registrar's Office no later than the end of drop/add
PLEASE PRINT OR TYPE

Name _____ ID# _____ Day Phone # _____

E-Mail _____ Class _____ Major _____

INDEPENDENT STUDY: Undergraduate and graduate students may arrange with individual instructors to undertake independent study courses. This petition must be completed and approved by the instructor, department chair and Registrar/Graduate Chairperson.

The College offers the following kinds of independent studies:

Independent Study – 097 A lower division course taken by a student in good standing (2.00 cumulative g.p.a.) whose educational needs cannot be met by courses available in the regular curriculum.

Independent Study – 197 An upper division course taken by a student in good standing (2.00 cumulative g.p.a.) whose educational needs cannot be met by courses available in the regular curriculum.

Honors Study – 199 An upper division course ordinarily taken by an upper division student with a 3.00 major g.p.a.

Graduate Independent Study – 299 A graduate course taken by graduate students pursuing their master's degree.

YOU WILL RECEIVE ACADEMIC CREDIT FOR ALL COURSES AND THE BUSINESS OFFICE WILL CHARGE ACCORDINGLY.

Term

___ Fall _____
___ Spring _____
___ Summer _____

Check One:

___ 097 Lower Division
___ 197 Upper Division
___ 199 Honors

___ 299 Graduate

Check One:

Undergrad course credit:
___ 1.00 ___ .50 ___ .25

Graduate units:
___ 3.00 ___ 2.00 ___ 1.00

If this is a regular course in our catalog, independently arranged, please list the Course Number: _____

TITLE OF COURSE OR STUDY: _____

1. CONTENT: (e.g. Describe the educational project, including academic goals and learning outcome).

2. READING LIST: (List educational materials such as books, journals, and internet sources)

3. METHOD OF EVALUATION: (example: Weekly written assignments, journal and final examination)

Student Signature_____

APPROVED BY:

Instructor's Signature_____

Instructor (Please print)_____

Department Chair_____

APPROVED DENIED

Signed_____ Date_____

Registrar/Graduate Chairperson