Undergraduate Independent Study Contract

| | REG |
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| Initials Term _ | |

Student to Complete the Following

*Denotes Required Fields

| Student Name*: | USC ID*: | | | |
|---|---|--|--|--|
| Phone: | _Email*: | | | |
| Major* <u>:</u> | - | | | |
| Course Information | | | | |
| Term*: Fall SpringSummer Year | *:Credit Hours*: | | | |
| Subject Code*:Course Number*: | Section Number*:CRN*: | | | |
| Instructor Name*: | USC ID*: | | | |
| Course Topic* (The course topic will appear on the student characters, including spaces): | e's academic record. Character limit -100 | | | |
| Course Summary: | | | | |
| Objectives (What new skills and/or information will the student acquire?): | | | | |
| Textbooks, Readings, or Other Resources to be Used: | | | | |
| Method of Evaluation: | | | | |

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| Certify whether this independent Study will be used as part of y | · • |
|--|---|
| It WILL be used as part of my major, minor, or cognate GPA). | (This grade will be computed in the student's |
| Major Minor Cognate | |
| It WILL NOT be used as part of my major, minor, or cog grades do not affect your GPA.) | gnate. I will receive a pass-fail grade. (Pass-fail |
| GPA*: Grade Point Average of 2.5 or greater required should verify GPA before signing. | to enroll in independent study courses. Dean |
| Only students who take an independent study as part of their moredit for independent study. Independent study credits applied no more than 10% of the total credit hours for that degree. The is limited to six hours. | toward any undergraduate degree may account for |
| Approval Signatures I understand that completion of this form does not constitute require the usual manner. Student is to submit completed copy to the Coregistration. | |
| Student Signature*: | Date: |
| Instructor Signature*: | Date: |
| Instructor to Complete*: | |
| Yes, this student is conducting undergraduate research developing the student's skills in inquiry and opportunities to co scientific, or creative work. | |
| No | |
| Advisor Signature*: | Date: |
| Department Chair/Area of Course Head Signature*: | Date: |
| Academic Dean Signature*: | Date: |