



# Application for Independent Study (Fall 2020)

**Independent Study** is designed to provide the student with a unique learning experience not achievable by ordinary course work. You must identify a member of the University’s Standing Faculty who is willing to direct your independent study and take responsibility for issuing your final grade..

Occasionally, you may wish to (or need to) undertake Independent Study credit as part of an Internship experience, in which case you must still produce a tangible, **academically-based** product for your grade and credit at the end of the internship. If approved, you will be registered for an “099” course within your academic department (e.g. MEAM 099) for 1.0 CU of credit, for a grade (not PF)..

**NOTE: FOR THOSE WHO WISH TO REGISTER FOR CREDIT FOR CPT PURPOSES, USE THE “CPT INDEPENDENT STUDY” FORM, NOT THIS ONE.**

**INSTRUCTIONS:**

1. Formulate a **Project Proposal**. The **Project Proposal** should be a brief document, consisting of:
  - i. Introduction
  - ii. Statement of the problem or objective of the project
  - iii. Results expected
  - iv. Manner of presentation of results (e.g. a final written report, demonstration, etc.)
  - v. Method of evaluation for project for grade
  - vi. References (where appropriate)
2. Meet with your proposed **Independent Study Advisor** to discuss your proposal.
3. If your Independent Study Advisor is not your assigned Faculty Advisor, meet with your assigned Faculty Advisor to discuss your proposal, and also how this credit will be used to satisfy your curriculum requirements.
4. **Please submit the completed form with a copy of your project proposal to the SEAS Registrar at [buoni@seas.upenn.edu](mailto:buoni@seas.upenn.edu).**

Term Degree Expected: \_\_\_\_\_ Today’s Date : \_\_\_\_\_

Name of Student: \_\_\_\_\_ Student ID# : \_\_\_\_\_

Email Address: \_\_\_\_\_ Tel #: \_\_\_\_\_

Major: \_\_\_\_\_ Faculty Advisor Name: \_\_\_\_\_

Term to be Registered:            Summer            Fall            Spring            Year: 20\_\_\_\_\_

**Project Title:**

**Independent Study Advisor** (print name): \_\_\_\_\_

Tel: \_\_\_\_\_ Email: \_\_\_\_\_

**Independent Study Advisor Sign-off:**

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

Faculty Advisor Signature: _____	Date: _____
UG Curriculum Chair Signature: _____	Date: _____