



INDIVIDUAL STUDY APPROVAL

This side for student information

Individual Study Approval Form Checklist

Individual study (course numbers ending in -97) provides students with opportunities to improve knowledge in courses of study which are not normally available. A student who requests to, or is advised to undertake such individual study should present a brief proposal to the appropriate faculty member.

Proposals eligible for an individual study may include

- The course is not being offered for the semester (completion needed for graduation or course was cancelled for the semester)
- Student has taken the lecture or lab portion and needs to complete the remaining part.
- Grade mode was different from the existing course offered in the semester.

PLEASE NOTE:

- **Student and faculty member must complete the information requested on this form**
- **All signatures and dates are required**
- **Incomplete forms will cause a delay in your registration**
- **ALL information must be printed clearly**
- **Individual studies are semester based. End date must be prior to or on the last day of instruction.**

Syllabus Requirements (Must be attached to Individual Study Approval Form)

- Course information
- Instructor
- Course readings/materials
- Course description
- Course Goals
- Student Learning Outcomes
- Instructional methods
- Course calendar
- Course policies
- Evaluation
- Support Services
- Disabilities Services

For more information on syllabus requirements please visit: <http://www.uaf.edu/uafgov/faculty-senate/curriculum/course-degree-procedures-/uaf-syllabus-requirements/>

Additional Information

- Submit completed Individual Study Approval form with attached syllabus to the Office of Admissions and the Registrar with an Add/Drop or Registration form.
- Registration will initially be processed as a subject of INDS and a course number based on level (i.e. F197, F297, etc.)
- Allow several working days for change of INDS to the designated department (i.e. from INDS to GEOG).
- Additional fees might apply for certain courses

Barcode label
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INDIVIDUAL STUDY APPROVAL



SID label
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RECEIVED

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P _____

Student - PLEASE PRINT CLEARLY

Name _____ UA ID No. _____
Last First MI

CURRENT MAILING ADDRESS

Email _____

Phone _____

Street & NO.

Day

City

State

Zip

Evening

COURSE INFORMATION- To be completed by instructor and student

Dept. _____ No. _____ Semester _____ Year 20 _____
(MATH, ENGL, ED) (Must end in -97) (Spring, Summer, Fall)

Course Start/end dates: Start date _____ End date _____

TITLE _____
(There are only 25 spaces available for the course title)

GRADING SYSTEM Letter Pass/Fail

NO. OF CREDITS _____ Contact hours per Week: With Instructor _____ Independently _____

INSTRUCTORS NAME _____ UA ID No. _____
Last First MI

PLEASE PROVIDE ALL REQUIRED SIGNATURES

Student's Signature _____ DATE _____

By signing above, the student requests registration for the class indicated on this form, and assumes all academic and financial responsibilities related thereto.

Instructor's Signature _____ DATE _____

Department Head's Signature _____ DATE _____

OFFICE USE ONLY

Registration INDS (RE or AC) Processed by _____ Date _____

Acad. Scheduling CRN Processed by _____ Date _____

Records Drop-Swapped (DS) Processed by _____ Date _____