

# CMCI Independent Study Contract

This contract must be completed BEFORE the independent study begins. After the form is completed and signed, a copy should be submitted to the department chair and to the CMCI Dean's Office

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\* Required

1. Student First Name \*

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2. Student Last Name \*

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3. Student email \*

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4. Date \*

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*Example: January 7, 2019*

5. Student ID \*

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6. Current Cumulative GPA \*

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7. Course code/number \*

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8. Semester (Fall, Spring or Summer) \*

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9. Year \*

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10. Number of credits for independent study (typical indept. study is 3 credits, but consult department for number that can be taken based on nature of learning) \*

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11. Faculty Member Name \*

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12. Faculty Member Email \*

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13. Rationale for Independent Study \*

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14. Learning activities the student will undertake for independent study \*

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15. Criteria for determining grade in independent study \*

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16. Dates of meetings with student \*

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17. Completion date \*

*Example: January 7, 2019*

18. Student signature \*

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19. Faculty member signature \*

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20. Date \*

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*Example: January 7, 2019*

21. Department chair or associate chair signature \*

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22. Date \*

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*Example: January 7, 2019*

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