



Independent Study Permission Form

NOTICE TO STUDENT

Independent studies are allowed under certain circumstances. If, after consulting with your academic advisor, an independent study seems appropriate, approach the faculty member about directing your independent study. In dialog with you, the faculty member will complete the first section of this form (see Section 1 below) and then you will obtain the necessary approvals (see Sections 2 & 3). This form must be completed by the end of the regular registration period, and the student is expected to complete the independent study course by the end of the designated term.

Section 1 – FOR INSTRUCTOR TO COMPLETE

Student name: _____ **Year:** _____

Term of Course: Spring May-Extended Summer Fall Year-Term

The suggested course title is: _____
Please keep the title short as there is limited space on the transcript.

Number of credit hours: _____ **Course Prefix:** AA AC AL IS WA

Course level: 1000 2000 3000 4000 5000 6000

Course number that will appear on the student transcript: _____ This Course Number will be the two-letter department abbreviation, followed by the first number of the course level. (.e.g., 5 for MA level courses) followed by “X99.” This number is assigned by Registrar, and no other number is allowed for Independent Study courses.

Explain the rationale for allowing this independent study course:

- A docx version of the course syllabus must first be approved by the Department Chair.
- Then, a PDF copy of the course syllabus *must* accompany this form and both be sent directly to academic_affairs@diu.edu.

Check all that apply (if any):

- This course has the same content and SLOs as the regular DIU course: _____ (A statement to this effect should be reflected in the syllabus heading, along with the ____X99 course number assigned by the Registrar, which will appear on the student’s transcript.)
- This course will substitute for DIU course: _____ on the student’s IPS.
- If the student is a F-1 Visa holder, the Instructor has notified the International Student Coordinator and has received confirmation that the student’s course load requirements are satisfactory.

Instructor’s Signature

International Student Coordinator Signature

SEE NEXT PAGE FOR OTHER SIGNATURES NEEDED.

<p>Section 2 – Department Chair approval</p> <p>Approved Denied _____ <i>Department Chair Signature</i></p>	<p><u>Registrar's Office Use Only</u></p> <ul style="list-style-type: none"> • IPS on file? Y N • Variation from IPS? Yes, notify student & advisor. No • Cooperative program student? Yes, notify cooperative program institution of new enrollment. No • International Student? Yes, notify the ISC Dir. No <p>_____</p> <p><i>Form Locking Signature</i></p>
<p>Section 3 – Academic Affairs approval</p> <p>Approved Denied _____ <i>Academic Affairs Signature</i></p>	
<p>Section 4 – For Registrar to complete</p> <p>Course # _____ Title: _____</p>	