HAMILTON COLLEGE
APPLICATION TO PURSUE INDEPENDENT STUDY

Before completing this form, review the regulations for independent study in the current college catalogue and discuss your plans with your advisor.

Name:_____ Class Year:_____

Concentration:_____ Date:_____

Applicable Term/Year: Fall _____ Spring _____ Credit: One Full Credit _____ One-Half Credit _____

Project Title:_____

An independent study application must include all of the following materials:

1. A proposal of one or more paragraphs in length that clearly describes the intended objectives of the study, including anticipated procedures to attain those objectives. This description should be addressed to a non-specialist reader. A bibliography should be included if appropriate to the study. If more than one student will be pursuing this independent study, include the names of all participants.

2. A statement clearly specifying the expected role of your supervisor in this study (frequency and purpose of meetings with supervisor, anticipated laboratory, studio, or field assistance, etc).

3. A statement clearly outlining your obligations in this study (preparation for meetings with supervisor, paper type and length, lab notebook, portfolio or finished products, anticipated deadlines, etc).

4. A statement clearly describing how the study will be evaluated. List all required coursework and specify how it will be weighed in determining final grade (include percentages whenever possible). If you are applying for a two-term independent study, indicate how each term's grade will be determined.

5. A one-paragraph evaluation of the project by the supervisor of the independent study.

6. A signed application form. When you have completed your proposal, take it to each individual indicated below for her or his review and signature. Read the regulations in the college catalogue that apply when the supervisor is an off-campus person who is not a member of the Hamilton faculty.

After all signatures are obtained, please submit the full proposal to the Dean of Students' Office during the term preceding that of your proposed study or, in exceptional circumstances, by the end of the add period of the term of the proposed study. ***Incomplete applications will not be accepted.***

Signed: _____ Supervisor of independent study

_____ Off-campus supervisor (if appropriate)

_____ Advisor

_____ Dept. or Program Chairperson in Area of Proposed Study

Reviewed by CAS on _____ (date)

Action: Approved _____ Approved with conditions _____ Not Approved _____

Signed: _____ Associate Dean of Students (Academic)

Distribution: Dean, Registrar, Advisor, Supervisor, Student Rev. 7/2006