# INDEPENDENT STUDY

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Star ID/Student ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credits Completed to Date:</td>
<td>Cumulative GPA:</td>
</tr>
<tr>
<td>Course Dept/Number:</td>
<td>Course Title:</td>
</tr>
<tr>
<td>Credits:</td>
<td>Semester/Year:</td>
</tr>
</tbody>
</table>

**INDEPENDENT STUDY:** As defined in Article 11, Section 1, Subdivision 5 of the MSCF employment contract. Independent study assignment requires approval of the Dean of Academic Affairs. The above request is made due to the following circumstances:

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

The following arrangements have been decided upon and the final grade will be determined by meeting the following expectations:

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

The request is: ☐ Approved ☐ Denied

Dean of Academic Affairs: ____________________________ Date: __________

Student Signature: ____________________________ Date: __________

Instructor Signature: ____________________________ Date: __________

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