

**SAINT JOSEPH'S COLLEGE**  
278 WHITES BRIDGE ROAD, STANDISH, MAINE 04084  
ACADEMIC AFFAIRS OFFICE (207) 893-6642

**INDEPENDENT STUDY FORM**

NAME: \_\_\_\_\_ CLASS OF: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ SEMESTER: \_\_\_\_\_

COURSE #: \_\_\_\_\_ TITLE: \_\_\_\_\_ CREDITS: \_\_\_\_\_

IN COMPLETING THIS **INDEPENDENT STUDY** FORM, PLEASE DESCRIBE YOUR PROJECT IN DETAIL INCLUDING THE FOLLOWING ASPECTS:

- \* PURPOSE AND OBJECTIVES
- \* PLAN AND OUTLINE OF THE STUDY
- \* HOW WILL STUDY BE EVALUATED?
- \* WHAT IS YOUR TIMETABLE FOR THE STUDY?
- \* HOW DOES THIS STUDY APPLY TO YOUR MAJOR?

**PLEASE ATTACH YOUR TYPED PROPOSAL TO THIS FORM AND OBTAIN THE APPROPRIATE SIGNATURES LISTED BELOW:**

INSTRUCTOR: \_\_\_\_\_ DATE \_\_\_\_\_

DEPARTMENT CHAIR: \_\_\_\_\_ DATE \_\_\_\_\_

ACADEMIC DEAN'S OFFICE:: \_\_\_\_\_ DATE \_\_\_\_\_

**ORIGINAL TO:** DEAN OF COLLEGE

**COPIES TO:** DEPARTMENT CHAIR  
STUDENT

RECORD'S OFFICE  
COURSE INSTRUCTOR