

UNIVERSITY OF SOUTH CAROLINA
UNDERGRADUATE INDEPENDENT STUDY CONTRACT

ALL required signatures must be obtained prior to registration.

Student's Name (Print) _____ Local Phone _____

Student Number (SSN) _____ Major _____

Course _____
Department Prefix Course Number Suffix Section Credits Schedule Code

Term Fall Spring Summer I Summer II _____ Year

Instructor (Print) _____

To be completed by the instructor who will supervise the study

Course Summary: _____

Course Topic: _____
(Will appear on Academic Record)

Objectives: (What new skills and/or information will the student acquire?) _____

Textbooks, Readings or other Resources to be used: _____

Method of Evaluation: _____

Instructor's Signature Date

I certify that this Independent Study:
() will be used as part of my: () Major.
() Minor.
() Cognate.
This grade will be computed in my Grade Point Average (GPA)
() will not be used as part of my major, minor, or cognate.
I will receive a pass-fail grade. (Pass-fail grades do not affect your GPA.)

GPA: _____
Grade Point Average of 2.5 or greater required to enroll in independent study courses. (Dean should verify GPA before signing.)

Only students who take independent study as a part of their major, minor, or cognate may receive grade point credit for independent study.
Independent study credits applied toward any undergraduate degree may account for no more than 10% of the total required credit hours for that degree. The total amount of independent study credit per term is limited to six hours.

Completion of this form does not constitute registration. Present this completed form to the Office of the Registrar and then register via VIP.

Student's Signature Date

Department Chairperson/Area of Course Head Date

Advisor's Signature Date

Student's Dean's Signature Date