



SCHOOL OF COMMUNICATION

Illinois State University

Independent Study Form (COM 400)

DEFINED: Independent studies afford students the opportunity to engage in intensive study of theory and research under the direction of a member of the graduate faculty. All independent studies require students to produce a scholarly product or creative project, and/or complete an examination. The student and supervising faculty member must collaborate to complete this form. It is the student's responsibility to obtain the signature of his or her graduate committee chairperson and to forward this form to the Graduate Coordinator. When approved, you will be issued an override for the course. At that time, you may complete the registration process.

REQUIREMENTS:

- Independent studies are restricted to students who are in good academic standing (cumulative GPA above 3.00).
- Students must have completed a minimum of 18 hours of graduate credit in the SoC (including all required courses).
- Students must have selected a permanent graduate advisor and submitted a graduate committee form.
- Students must produce a term paper or creative project that reflects the number credit hours earned. Each credit hour earned requires 45 hours of study for the term period. See your graduate advisor regarding credit limits for this course.
- Students must plan to meet with the supervising faculty member no fewer than two times per month to discuss project accomplishments and to receive feedback on work completed.
- Student must submit a copy of the final report/project for the SoC files.
- No credit is given for work experience.

Name: _____ **UID #** _____

ISU Email Address (please print clearly): _____

Credit hours to be earned: _____

Semester: (circle one) Fall Spring Summer **Calendar Year:** _____

GENERAL TOPIC/ DESCRIPTION (of Independent Study):

DESCRIPTION OF FINAL PROJECT (e.g., term paper or other outcome to determine if contract/requirements of independent study have been met) ****Please note, all reports and projects must include a comprehensive reference page)**

DESCRIBE MEETING SCHEDULE BETWEEN STUDENT AND SUPERVISING FACULTY MEMBER (e.g., once a week at the supervising faculty's member office)

Student Signature

Date:

Supervising Faculty Member

Date:

Student's Graduate Advisor

Date:

SoC Graduate Coordinator

Date:

SoC Executive Director

Date: