



STUDENT INFORMATION

Name _____ PID _____
 Email _____
 Program of Study MCRP Advisor _____
 PhD Advisor _____
 Undergraduate Major _____ GPA _____

COURSE INFORMATION

Semester requested Fall Spring Summer Year _____
 Number of credit hours sought _____ **Students are expected to devote at least forty-five hours of independent work per semester per credit hour.*
 Instructor name _____ Instructor PID _____
 Instructor email _____
 For this course/section, the faculty member has no more than two students
 For this course/section, the faculty member has more than two students and is requesting an exception to University Policy for the reason below:

Course requirements

- Please **attach a syllabus** that includes the following:
- Meeting requirements (type and frequency)
 - Reading assignments
 - Assignments & due dates
 - Assessment (% of course grade based on each required assignment)
 - If you are requesting to take an existing course as an independent study, include a memo indicating the unusual circumstance that warrants an exemption from the University Policy against this practice.

*This document and the attached syllabus is a contract between the instructor and the student and complies with [UNC's Independent Study Policies](#). The instructor and student are jointly responsible for notifying the department of any deviations. **All deviations must be documented.***

APPROVALS

Instructor
 I agree to supervise this student's work as outlined above and in the attached syllabus. I will undertake the instructional responsibilities associated with this course and will abide by the Honor Code.

Name	Signature	Date
Student		

I agree to complete the work outlined in the attached syllabus and will abide by the Honor Code.

Name	Signature	Date
Director of Graduate or Undergraduate Studies		

I have reviewed this application and the attached syllabus. This proposal is:
 Approved as is Requires more information Not approved

Name	Signature	Date
Department Independent Study Coordinator		

I have reviewed this application and the attached syllabus. This proposal is:
 Approved as is Requires more information Not approved

Name	Signature	Date
------	-----------	------