## McKendree University - Office of Academic Records Independent Study Registration Form

				Student ID Number:				
Address:								
Campus:   M	Iain (Lebanon)	Louisville	Radcliff	☐ Scott	☐ Scott ☐ Nursing Center (Please specify)			
	-	ent Study:						
		<u>ll for independer</u>					•	
		n overall cumula Edy including cor			ea GPA of 3.0.	<u>No more than 9</u>	9 hours may be	
iaken by ina	ерениет зи	ay including cor	темрониенсе	WOTK.				
<b>Step #1</b> : Brin	g form to the C	Office of Academic F	Records office to	verify eligibi	lity:			
	Н	ours in subject area:	:	Hours prev	viously earned in in	nd. studies:	<u> </u>	
Subject area GPA:				Cumulative GPA:				
☐ Str	udent <i>is eligibl</i>	e for an independen	t study.	Student	<i>is not eligible</i> for	an independent stu	udy.	
	Office of Acce	lemic Records			Date		_	
	Office of Acad	lemic Records			Date			
<b>Step #2</b> : The	instructor mus	t complete the section	on below (attach	an additiona	l piece of paper if	the space below is	s not adequate):	
Term:  Fall	☐ Spring	Summer	Year:		<u></u>	Dates:		
	480					Credit Hours:		
Department	Course No.	Course Title (Course title	es may only contain	30 characters, inc	cluding spaces)			
Course outline	and expectati	ons:						
Methods of Ev	aluation							
Meinous of Ev	анингон.							
	Instructor's Si	gnature			Date		<u> </u>	
		res in the order indi		nce this form	is returned to the (	Office of Academic	c Records, the	
student will be	officially enro	lled for the Independ	dent Study.					
1)				3)				
Student		D	ate	Div	rision Chairperson	in Subject Area	Date	
2)				4)	vost of the Univer			
Academic A	Advisor	D	ate	Pro	vost of the Univer	sity	Date	
			~ ~ ~ ~ Office	Use Only ~				
Course Section Cr	eated:	Se	-	-			Initials:	
222000					al Aid Yellow –In			