INDEPENDENT STUDY APPROVAL FORM

An independent study is equivalent to a semester-long course. We therefore expect students to spend the equivalent of approximately 180 hours engaged in academic work. Use this form for an independent study supervised by a Hampshire College faculty member. Submit the form to the Central Records Office before the end of the relevant preregistration or add/drop period.

This form is not to be used for the following:
- Work supervised by Five College faculty: Submit your request on TheHub. It will be recorded as Five College course.
- Music performance/private lessons: Submit your request on TheHub.
- If your primary activity is attending an existing class, you must sign up for the class on TheHub.

Student Name (print): ______________________________________ ID #: ______________

Email: __________________________________________ Term of Independent Study: __________

Level: □ 100 □ 200 □ 300 Check if using as Division III Advanced Educational Activity: □
Check appropriate box if using to fulfill Division I distribution area:
□ ADM □ CHL □ MBI □ PBS □ PCSJ

School of Faculty Supervisor: □ CS □ CSI □ HACU □ IA □ NS

Independent Study Title: Limit of 50 characters (including spaces) due to appearance on transcript.

____________________________________________________________________________________

Description of Independent Study Project: Briefly describe your project, how often you will meet with your faculty supervisor, and the expected end product. Use the reverse side or attach a separate document if needed.

Faculty Supervisor (print name): __________________________________________________________

Faculty Signature: ________________________________ Date: ______________

Advisor Signature: ________________________________ Date: ______________