INDEPENDENT STUDY APPROVAL FORM

Use this form for an independent study supervised by a Hampshire College faculty member. Submit the form to the Central Records Office in the Cole Science Center 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, recorded as Five College course.
- Music performance/private lessons: obtain music performance form from CR or the CR webpage.
- Work supervised by staff or community members: obtain narrative evaluation at end of activity, recorded as learning activity

Note: If your primary activity is attending an existing class, you must sign up for the class on TheHub

Student Name: ___________________________________________ Term of Entry: ____________
(Please Print)

Email: __________________________ Term of Independent Study: ____________

Level: (to fulfill distribution circle 100 level) School Of
100 200 300 Faculty Supervisor: CS / CSI / HACU / IA / N
(Circle One) (Circle One)

Independent Study Title: _______________________________________________________________________
(Please print clearly. This title will appear on your official 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’s Signature: __________________________ Date: ____________

STUDENTS ENTERING FALL 2011 AND BEYOND PLEASE CHECK WHAT DISTRIBUTION THIS SATISFIES IF APPLICABLE

_____ADM (arts/design/Media)  ____MBI (Mind/Brain/Information)
_____CHL (Culture/humanities/language)  ____PBS (Physical/Biological Sciences)
_____PCSJ (Power/Community/Social Justice)

Revised 8/8/11