MOUNT <u>HOLY</u> OKE	Independent Study Declaration Form
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To participate in an independent study, this form must be completed, signed, and returned to the Registrar's Office by the end of the relevant add period. Signatures of the instructor, department chair, and student are all required.

Student name:	Class year:	Major(s):	
Instructor name:	Dept or subject of	f indep. study:	Term: (e.g. Fall '25)
Level (check one): 295 Note: 295P and 395P are for inde volunteer setting, and a s	295P pendent study work with a substantial academic compo	•	
Credits (1 to 4 for a 200-level, 1 to 8 for a 30 Per federal regulations, the expectation is one contact hour		ork per week for each cred	
Duration: For half-semester For half-semester independent studies, a		Second-half semest within the half semester	section #: ter Initials:

Independent Study Plan

Description, including learning outcomes and schedule of work. If the independent study is part of a thesis, please describe the project here. Attach an additional sheet if necessary.

Indep. study instructor signature:	Date:
Department chair signature:	Date:
Student signature:	Date: