NIAGARA COUNTY COMMUNITY COLLEGE

Office of Academic Affairs

Independent Study

Information Sheet for Students

**Student**

1. Contact faculty member to discuss Independent Study Proposal: purpose, activities, timeline.
2. Obtain a copy of Independent Study Application and Proposal Outline form from the Office of Academic Affairs or from faculty member. (Available on FYI page)
3. Complete Part I of application and the Proposal Outline with instructor. Instructor forwards to Division Chair for approval, Division Chair forwards to Office of Academic Affairs.
4. The Office of Academic Affairs will notify student regarding tuition/fees incurred upon registration of Independent Study Course.

# **Instructor**

1. Complete Proposal Outline in consultation with student, including information on 15 activity hours per credit hour including student/faculty contact.
2. Sign and forward Independent Study application and Proposal Outline to the appropriate Division chair, Division Chair forwards to Office of Academic Affairs for approval. (Part III)
3. Obtain approved Independent Study application/Proposal Outline from the Office of Academic Affairs.
4. Supervise study, approve completion, assign grade (Part IV) on form and in Banner, forward application to Division Chair for final approval.

# **Division Chairperson**

1. Approve Independent Study application and Proposal Outline as submitted by Instructor (sign

Part III) (and indicate if payment is required as per Faculty Association Contract) Note: Office of Academic Affairs may disapprove payment if sufficient funds are not available within the budget line.

1. Verify and sign that Independent Study has been completed. (Part IV)
2. Forward to the Office of Academic Affairs for final approval and distribution of copies.

NIAGARA COUNTY COMMUNITY COLLEGE

Office of Academic Affairs

**APPLICATION FOR INDEPENDENT STUDY (IDS)** Revised 8/2022

1. **Limitations**

Students may take a maximum of 10 credit hours of independent study. The objectives of independent study are (1) to provide an opportunity for the development of closer faculty-student relationships through the exploration of topics of mutual interest, (2) greater academic freedom for the student in the selection of his or her field of study, (3) guidance of the student in areas of knowledge outside of his or her existing curriculum and (4) application of knowledge obtained through traditional study to carefully selected areas of interest outside the classroom. Regular course offerings may not be taken for independent study credit. The proposal is the shared responsibility of the instructor and the student. The instructor will be responsible for the academic soundness of the project and evaluation of the student’s performance. Since the purpose of independent study is to extend a student’s knowledge BEYOND the courses which are part of existing curricula, proposals for independent study credit will not be accepted if they duplicate regular course offerings.

1. **Request for Independent Study**

Student's Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID # @\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester: Fall\_\_\_\_ Spring\_\_\_\_ Summer Mod 1\_\_\_\_ Mod 2\_\_\_\_ Mod 3\_\_\_\_

IDS Credit Hours:\_\_\_\_\_\_ Digital Course Material (fee will apply): Yes\_\_\_\_ No\_\_\_\_ Beginning Date:\_\_\_\_\_\_\_\_\_\_\_ Ending Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Hours Presently Registered For: \_\_\_\_\_\_\_\_ Grading System: S/U\_\_\_\_\_ Letter Grade\_\_\_\_\_

Title of Proposal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: Copy of Proposal Outline for Independent Study Course must be completed by instructor and attached to this application prior to any approvals.

**III. Approval of Independent Study**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Instructor Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Division Chairperson Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Office of Academic Affairs Date

Hegis/CIP Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course offered in current semester’s register of classes?

Yes \_\_\_\_\_\_ No \_\_\_\_\_

Faculty Payment: Yes\*\_\_\_\_\_\_ No \_\_\_\_\_

\*If yes, 8 hours per credit of contact between student and instructor must be identified on proposal outline (included in 15 hours per credit which is required regardless of instructor payment)

Estimate of tuition & fees to be charged upon registration:

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office of Academic Affairs contacted student regarding cost \_\_\_\_\_\_\_\_ AA staff initials \_\_\_\_\_\_\_\_\_\_\_\_ Date

**IV: Completion of Independent Study**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor Date Grade Assigned

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Division Chairperson Date

**V: Approval of Faculty Payment/Completion**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Office of Academic Affairs Date Amount

**Office of Academic Affairs Use Only**

Previous IDS crs\_\_\_\_\_\_\_\_\_\_\_ IDS # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CRN# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To Cashiers \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To Instructor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rec’d w/Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c: Records

Instructor

Office of Academic Affairs

NOTE: See Article 7, Section 7.6, of the 2006-15 Faculty Association Contract for explanation of compensation for supervision of Independent Study.

**NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID @\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TERM\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

NIAGARA COUNTY COMMUNITY COLLEGE

**Office of Academic Affairs**

# **INDEPENDENT STUDY**

# **PROPOSAL OUTLINE**

Independent Study must consist of 15 hours of student activities for each credit hour (include additional sheets as needed).

1. **COURSE GOALS**

At the conclusion of this Independent Study, the student will:

(know how to/be able to demonstrate/have learned about/be knowledgeable about)

a)

b)

c)

## OBJECTIVES

(What are the activities the student will undertake? What types of assignments will be given? What learning assignments will lead to the completion of the above goals?)

1. **METHODS TO ACHIEVE OBJECTIVES**

(How will the above assignments be accomplished? How will required 15 hours per credit of student activities be achieved? How will required hours be monitored? When will 15 hours per credit of contact between student and faculty occur, if faculty payment is involved)

1. **GRADING/EVALUATION PROCEDURES & CRITERIA**
2. Beginning Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ending Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor Student

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_