

INDEPENDENT STUDY CONTRACT

Department of Instructional Technology
Utah State University

This special credit contract verifies that the undersigned have entered into an agreement regarding the assignment of credit to a non-course learning opportunity.

Name _____ Phone Number _____

Address _____ E-mail Address _____

Semester _____ Year _____ Course Number _____ Credit Hours _____

Nature of the assignment (Use attachment if needed)

1. Objectives

2. Activities

3. Evaluation:

As the Student taking this independent study, I recognize and concur that the assignment will be completed by myself with the assistance and to satisfaction of the faculty supervisor, whose signature appears below, no later than _____.

Student Signature _____ Date _____

Faculty Supervisor _____ Date _____

Other/Sponsor (optional) _____ Date _____

Completion of Contract Verification

Outstanding Work _____ *Acceptable Work* _____ *Unsatisfactory Work* _____

Date Completed _____ *Grade* _____ (*pass/fail only*)

Faculty Supervisor _____ *Signature* _____

Comments _____
