Guidelines and Application for Independent Study and Fieldwork

**Definition.** At Michigan State University, Independent Study is planned study, highly individualized, not addressable through any other course format, proposed in writing by the student on a standard form, accepted for supervision by a faculty member, and approved by the student’s academic advisor and the teaching unit at the beginning of the semester.

**Guidelines.** Independent Study should: (a) consist of work not described in the University catalog in any other format; (b) be taken under a course number commensurate with the student’s class level, major field, and experience; (c) relate to a subject for which the student has adequate preparation; (d) be directed by a faculty member with whom there is periodic contact and consultation throughout the study; (e) not exceed eight semester hours of credit in a single semester; (f) not exceed 10% of the credits earned in a bachelor’s program; (g) be applied for on the form provided by the University, or any equivalent departmental or College form; (h) be approved on this form before the student enrolls in the course; and (i) have an Affiliation Agreement signed by any site/company that is not based on a Michigan State University program (i.e. private businesses, public schools, associations, etc.)

**Application and Enrollment.** Please complete this form and the Application to Enroll in Variable-Credit Courses. Take both completed forms to the Department of Kinesiology offices in 134 IM Sports Circle.

### Enrollment Information

Name (Last, First, Middle Initial) ___________________ PID ____________________________
Course: KIN _________ Section _________ Credits ______ Semester:  FS SS US Year ____________

### Course Description

1. **DESCRIPTION** (subject matter, purpose, methods) ____________________________________________
2. **RATIONALE** (why independent study rather than regular course?) ____________________________
3. **PREPARATION** (relevant course work, reading, work experience, etc.) ____________________
4. **WORK TO BE COMPLETED**
   (a) Type and amount of reading, writing, lab work, etc. ________________________________________
   (b) Estimated contact hours per week with instructor __________________
   (c) Deadline for submitting work for final evaluation __________________
   (d) Evaluation procedure __________________________________________

5. **AFFILIATION AGREEMENT NEEDED?**  Yes  No (circle one)
   If yes, what is the name of the site that the student will complete the experience at? __________________________________________

### Sign-Offs

Student ________________________________ Date ____________________
Instructor ______________________________ Date ____________________