

Independent Study Course Registration

There are 2 forms that must be completed and turned into the College of Health Sciences Dean's Office for Independent Study Course Registration. You are required to obtain all signatures before submitting it to the Dean's Office.

1. Request Enrollment in an Independent Study Course 4995 – Undergraduate

OR

Request Enrollment in an Independent Study Course 7995 – Health Sciences Professional

Section 1: Student Information and Section 2: Independent Study course Information must be completed on the computer before printing and obtaining signatures. *Handwritten forms will not be accepted.* This form can be found on Marquette Center, under Forms – Academic, as **Independent Study Course – Undergraduate 4995 or Independent Study Course Professional 7995**

2. College of Health Science Independent Study Course 4995 / 7995 Addendum

This form includes the description of the topic and its relationship to your academic goals and course of study along with what the tangible results will be, and how you will be graded.

Tips for completing the Request Enrollment in an Independent Study Course forms:

Credit Hours – *How many credits are you seeking to earn with this independent coursework*

Grading Basis – *Graded – You want to earn a letter grade (A-F)*
Credit / No Credit – Credit earned with the equivalent of a 'C' or better

Session – *Refers to the date range in which the coursework will be completed.*

<i>Fall / Spring Semesters</i>	<i>Session 1 is the traditional 16 week semester</i>
	<i>Session 2 is the 1st 8 weeks of the semester</i>
	<i>Session 3 is the 2nd 8 weeks of the semester</i>
<i>Summer Sessions</i>	<i>Session 1 is the 1st 6 weeks</i>
	<i>Session 2 is the 2nd 6 weeks</i>

College of Health Sciences

Independent Study Course Addendum (4995/4995H, 7995/7995H)

Complete and submit with the university independent study form (www.marquette.edu/central/registrar/forms.php)

Student Name: _____ MUID: _____ Major: _____

Independent Study Title (must be 60 characters or fewer including spaces):

Total Number of Independent Study credits to date: _____

Number of Credits (this course): _____ Semester and Year: _____

Count towards (check one):
 Primary Major Requirement
 Elective Course Requirement
 Other: explain _____ (2nd major, minor, etc.)

Schedule of meetings with supervisor – weekly, bi-weekly, monthly, etc.:

Description of the topic and relationship to your academic goals and course of study:

Tangible result of this work i.e., work to be graded by faculty mentor:

For Office Use Only:

Date Completed:	Completed by:	Action
		Section number built in CLSS: _____ (1XX non-honors or 9XX for honors)
		Faculty assigned to section
		High Impact UG Research attribute request to be added in comments
		Student enrolled in course
		Subtitle added to transcript notes
		Confirmation email sent to student/faculty (and cc Dr. Lobner if "H" section)
Notes		