Saint Joseph’s University
College of Arts and Sciences
College of Business and Administration

Student Application for Independent Study, Directed Readings, Research, and Similar Courses

Student ID_____________________________________
Date:________________________
Student’s Name (Please Print)_____________________________________________________
Student’s Major____________________________________________________________________
Year in College: Sophomore Junior Senior
Cumulative Quality Point Average___________
Semester in which course is to be taken_______________________________________________
Course Title ___________________________________ Course No. ___________________________
Faculty Mentor for the course_________________________________________________________

1. A Course Expectation form or plan of study must accompany this application. Please follow the sample format below.
2. Obtain the approval of the Faculty Mentor for this Independent Study and the Chairperson of your department.

Faculty Mentor’s Signature_________________________________________ Date _____________
Chairperson’s Signature______________________________________________ Date _____________

3. Present this application, with course expectation form, to the Assistant or Associate Dean of the College in which the course is catalogued.
4. When this request is approved, the course will be added to the student’s schedule by the Registrar’s Office.

_______________________________________________________________________________

This section is to be completed by the Assistant or Associate Dean of the College in which the course is catalogued.

Request is approved________________ Not approved______________________________

Dean’s Signature:_______________________________________________________________
Comments:____________________________________________________________________