



FORMAN CHRISTIAN COLLEGE
(A CHARTERED UNIVERSITY)

INDEPENDENT STUDY (IS) REQUEST FORM

Independent Study (IS) is a credited course meant for students to pursue their individual interest during a semester under the supervision of a faculty member. Such courses are private in spirit but directed and based on serious expectations. These courses are to be designed in the field of the student's academic needs to result in substantive outcomes, be they a project, a written paper, a written report or other essential requirements containing significant analysis and interpretation of the approved topic.

Note that when the students opt for an IS they must have a strong justification to do so.

Instructions

Students wishing to register for an IS course must first make arrangements with a faculty member who holds expertise in the desired area. This faculty member will supervise the student's work. The student and the Supervisor should agree on the course title, plan of study, objectives and expectations, as well as on the nature of final requirements and evaluation criteria.

1. Please note that the IS involves a rigorous academic experience equivalent to that of any other FCC undergraduate course. IS should not duplicate the available course offerings but may be based on their adaptation to result in specialties that cater to the needs of the students.
2. In order to earn credits, the student and their Supervisor will consent on a drafted course outline along with timeline or timetable. The course outline, like any other course outline, should include the academic instructions, detailing a periodic chart of activities based on readings, frequent writings relevant to the course design, teacher's comments on these writings, revisions, teacher's comments about notified improvement, etc. The course outline should also mention the number of tutorials and frequency of meetings between the student and the Supervisor, and must be submitted to the approving authorities along with this form.
3. As a general expectation and apart from the individual input of the student, involving normally 09 (nine) hours per week or almost 150 (one hundred and fifty) study hours per semester in terms of visiting the libraries, reading or researching or other project based activities. In addition, the student should meet with the Supervisor at least once every fortnight (15 days), and at minimum 8 times during the semester.
4. All requirements finalized for the IS must be completed during the semester for which the student is registered, otherwise this may result in an "I" or Incomplete. The Supervisor will assess and evaluate the student's progress and requirements for the course, and submit a grade by the end of the semester.
5. The student submits the completed IS Permission Form to the Office of Academic Services by no later than the end of drop/add period of the semester in which the IS is to be taken.
6. When this Independent Study begins the course is registered with "IS" coding.



INDEPENDENT STUDY REQUEST FORM

Student's Name: _____ Roll No: _____

Email: _____ Cell Phone: _____

Independent Study Course

Course Code: _____ Credit Hrs: _____ Semester for IS: _____

Supervisor Name: _____ Department: _____

1. Title of the proposed Independent Study: _____

2. Description of the proposed Independent Study: Provide a one to two paragraph description of the proposed study, including topic, course goals, research/readings to be conducted. The instructor and/or department or program may require a more detailed proposal, including a complete outline and timeline, a list of sources and bibliography, a rationale for independent study as opposed to regular course work, etc., so kindly use extra sheets for this portion as needed

3. Final requirements: Describe the nature and length of the final requirements (e.g. academic paper, artistic product, research report, etc.)

4. Scheduled meetings and work expectations: Provide information on frequency and length of meetings with instructor, and expected work commitments and/ or timetables

5. **Grade to be based on:** Provide information on how your work in the course is to be evaluated.
Description of Independent Study; Final requirements; Scheduled meetings; Work expectations

SIGNATURES

Student: _____ Date _____

Supervising Faculty Member: _____ Date _____

Dept Chair of IS Dept: _____ Date _____

Dean of IS Dept: _____ Date _____

If IS Dept is different than student's Major:

Dept Chair of Student's Major: _____ Date _____

Dean of Student's Major Dept: _____ Date _____

Academic Services Office:

Processed by: _____ Date _____