

## REQUEST FOR APPROVAL OF CREDIT FOR INDEPENDENT STUDY

To request credit for an independent study, return this form to the Registrar's Office by the registration deadline for the semester in which you wish to receive credit.

Please note that independent studies do not satisfy general education requirements. Reviewing the [Guidelines for an Independent Study](#) will be helpful in developing your Independent Study.

Because Barnard College grants degree credit only for academic work, an internship per se does not qualify for credit. If the internship is related to an academic field represented in one of Barnard's departments, the experience may suggest a research project culminating in a substantive research paper. A student contemplating such an internship -- who wishes to receive credit for a related independent study -- must discuss their plans with a member of the Barnard faculty in a related field.

**Once a substantive academic project has been developed, answer the following questions and secure the approvals requested below. Your request will be reviewed by the Faculty Committee on Programs and Academic Standing.**

(Note: F-1 visa holders must have declared majors and require approval from the International Student Services Office to file this form. Please contact International Students Services at [iss@barnard.edu](mailto:iss@barnard.edu))

STUDENT \_\_\_\_\_ CLASS \_\_\_\_\_ MAJOR \_\_\_\_\_

SEMESTER IN WHICH INDEPENDENT STUDY WILL RECEIVE CREDIT \_\_\_\_\_

DATE \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**Please submit your responses to the following questions on a separate sheet(s).**

1. Describe the purpose and plan for the independent study.
2. On a separate page, list the sources for your research, including specific readings and other materials.
3. How many faculty conferences are required? \_\_\_\_\_ meetings of \_\_\_\_\_ hour(s) each
4. Other than these meetings, how many hours of work will be involved? \_\_\_\_\_
5. Describe the culminating product. (If an essay or paper, specify number of pages required.)
6. Provide any other pertinent details.

CREDIT VALUE RECOMMENDED BY BARNARD DEPARTMENT \_\_\_\_\_

(NOTE: Once this request has been approved, the credit value may not be changed.)

\_\_\_\_\_  
FACULTY SPONSOR (signature)

\_\_\_\_\_  
DEPARTMENT

\_\_\_\_\_  
DEPARTMENT CHAIR (signature)

\_\_\_\_\_  
FACULTY SPONSOR (print name)

\_\_\_\_\_  
DEPARTMENT CHAIR (print name)

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APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ FOR CPAS \_\_\_\_\_ DATE \_\_\_\_\_

REGISTERED \_\_\_\_\_ Colleague \_\_\_\_\_ SIS COURSE NUMBER \_\_\_\_\_