**Independent Study**

**Policy**Exceptionally qualified LISC MAJ students entering her/his 4th year may take a program of independent study provided it has been approved by both the Associate Dean LISC BCHM and the Assistant/Associate Dean (Studies) in the Faculty of Arts and Science (FAS).

Please note the following:

1. The Associate Dean LISC BCHM may approve that an independent study program be counted toward the “options” or “supporting” portions in the LISC MAJ.
2. To distinguish an Independent Study for LISC MAJ students from 499 Research Projects for LISC SSP students, only LISC 594/3.0 or LISC 595/6.0 units will be considered by the Associate Dean LISC BCHM. Either of these may encompass one or two terms in 4th year.
3. Only LISC MAJ students in 4th year are eligible to be enrolled in either LISC 594/3.0 or LISC 595/6.0.
4. **Must take 3.0 units in a level-3 or higher Laboratory course:** ANAT 309/3.0; ANAT 312/3.0; ANAT 315/3.0; ANAT 316/3.0; ANAT 409/3.0; BCHM 421/3.0; BCHM 422/3.0; BCHM 442/3.0; BIOL 321/3.0; BIOL 331/3.0; BIOL 322/3.0; BIOL 330/3.0; BIOL 331/3.0; BIOL 334/3.0; BIOL 401/3.0; BIOL 403/3.0; BIOL 404/3.0; BIOL 441/3.0; EPID 401/3.0; LISC 390/3.0; LISC 391/3.0; MICR 435/3.0; MICR 436/3.0; NSCI 433/3.0; PHGY 355/3.0

The Associate Dean LISC BCHM may approve an independent study program *without* permitting it to be counted toward a concentration in a degree plan. It is, therefore, the responsibility of students taking such programs to ensure that the concentration requirements for the degree will be met.

**Procedure**   
Requests for such a program must be received by the Office of the Associate Dean LISC BCHM / Assistant/Associate Dean (Studies) FAS one month before the start of the first term in which the student intends to undertake the program. Requests must include: i) a detailed outline of the project/course, including its aims, the topics to be studied, and a preliminary list of readings; ii) the names of the faculty members supervising the project/course, including the principal coordinator; iii) the number of units for which the project/course is to substitute, based on an estimate of the amount of work and/or learning hours that the student is expected to invest in the project/course (please see #2 in **Policy** above); and iv) the method by which the student’s performance is to be evaluated, and the method by which the grade or grades will be assigned.

**Note**: If the independent study course is to be included as part of the student’s concentration requirements, the request should indicate how this course will be counted (i.e. for which required course(s) this course will substitute).

The Associate Dean LISC BCHM may, in consultation with the student and faculty members involved, propose modifications in the project, particularly with respect to the number of units to be assigned to it (i.e., either 3.0 or 6.0 units). The Associate Dean LISC BCHM may require an interview with the student. If approved, the Faculty Office will forward the request to the Timetabling Office so that course can be timetabled, and then add the student to the course. Effective Sept 2017

**Request for Independent Study**

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course code and units:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Term or Session:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
(one of either LISC 594/3.0 or 595/6.0)

Project/course outline (to include aim of independent study, topics to be studied, list of readings, study period, method of evaluation, make-up of final grade, deadline for final report/exam):

**Signatures:**

I agree to supervise this independent study program and provide the final grade:

Professor Name E-mail

Professor Signature Date

I agree to co-supervise this independent study program (if two supervisors):

Professor Date

I agree to the terms and deadlines outlined above:

Student Name Student Number Date

Student Signature E-mail Date

**Departmental Approval:**

Department Head or Chair of Undergraduate Studies Date

**Faculty Approval:**

Associate Dean (Studies) Date

**Request to Timetabling Office:**

Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Term \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UPDATED: October 30, 2018