

Independent Study Contract
Department of Theology & Religious Studies

Semester: _____ 201____

To be completed by the student with the advice of the faculty member who will supervise the work. Five copies are to be distributed to the: (1) Student, (2) Supervisor, (3) Department Chair, (4) Dean, and (5) Student's File.

Course: TRS 492 _____ (A, B, or C for 1, 2, or 3 credits) #Credits _____

Title of Independent Study/Project

Supervisor Name

Student Name

Project Description:

Student Learning Objectives & Project Assessment Measures:

Project Timeline with Progress Benchmarks:

Method of Evaluation of Study/Project (including details of how the grade will be determined):

Remarks:

Institutional Review Board (IRB)

- Does any work in this study require IRB approval? Yes No
- If yes, please provide a letter from the IRB approving this study.
- IRB website: <http://www.jcu.edu/graduate/research/irb>

Student Signature

Date

Supervisor Signature

Date

Chairperson Signature

Date

Dean Signature

Date