Faculty Agreement to Supervise Independent Study Project (ISP)

Student Name: ______________________________ Last 4 of SSN: ______   Class of: _______

In the field of: ___________________________________________________

Independent Study Project – **please select:**

_____ Academic Paper

_____ Supervised Research/Research Assistant*

_____ Teaching Assistant* - 2 credits max and credit/fail grading only

* Students serving as an RA and/or TA for a Law faculty member may receive credit for that work as an Independent Study. In lieu of credit, students may elect payment for this work, with fulltime Law faculty only. This election for payment MUST be made at the start of the semester. If you elect payment over credit, you need not complete this form. Instead, please go to Business Affairs to start the payroll process for an RA/TA position.

Please circle.

Semester: Spring Fall Year: _________

Credits: 1 2 3

Grading Option: Grade Credit/Fail

Please provide a detailed description of the work that will be completed for the Independent Study:

_________________________________________________________

Faculty Supervisor Signature    Faculty Supervisor Name

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*Academic Dean’s Signature (if required)* - independent studies supervised by an adjunct faculty member will require the approval of the Associate Dean for Academic Affairs, Claire Wallace.