REQUEST FOR INDIVIDUAL STUDIES

Individual study credit is provided by the College of Social Work to allow students an opportunity to pursue academic study, individually, in an area of concern not otherwise available through regular course enrollment. Individual study should be elected for in-depth study in a given area with the sponsorship of a Social Work faculty member.

Individual study is available for one to three credit hours with the determination of hours subject to approval by the faculty sponsor. All such credit is graded Satisfactory (S) or Unsatisfactory (U) and will not affect a student’s cumulative point-hour ratio. A maximum of 7 hours of individual study credit may be applied toward a degree for the Advanced Standing Alternative Plan student while all others may use up 9 hours.

It is the responsibility of the student to structure, design, and implement a course of study in conjunction with a faculty sponsor who is willing to undertake such a project. A student should initiate this process with a written proposal in accordance with the guidelines indicated on the second page of this form. This project should be designed in accordance with the academic standards of the college and university. All requests must have the approval of the faculty sponsor AND the student’s faculty advisor.

DIRECTIONS FOR THE STUDENT

Complete the information requested on both pages of this form. Attach additional sheets if necessary. Obtain the required signatures from the faculty sponsor for Social Work 7193 and your faculty advisor. You must complete this form (with appropriate signatures) before you can get registered for Individual Study credit.

After you have completed the registration process, return the completed form to the MSW Program Office, 303 Stillman Hall, 1947 College Road, Columbus, OH 43210. This form must be received in the program office no later than the end of the first week of the semester of registration. It is advisable for you to make a copy for yourself before submitting the form to the MSW Office.

____________________  _______________________________________________________________________
Student’s Printed Name  Student’s Signature

_____________________________________________________________________________________
Address  Phone Number

City  State  Zip Code  Date

COURSE REQUEST

SWK 7193 for _________ credit hours for __________________________ Semester, 20________

APPROVAL

_____________________________________________________________________________________
Faculty Sponsor’s Signature  Date

_____________________________________________________________________________________
Faculty Advisor’s Signature  Date
INSTRUCTIONS TO THE STUDENT
Please fully complete the information requested in the space below or on an attached sheet.

EDUCATIONAL OBJECTIVES OF THE STUDY
Briefly discuss the purpose of the study to be undertaken and the outcomes which you hope to achieve (e.g., what you hope to learn, discover, etc.)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

RELATIONSHIP TO YOUR PROGRAM OF STUDY AND CAREER OBJECTIVES
(e.g., How will this study strengthen, enhance, or enrich your program?)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

SPECIFIC ACTIVITIES TO BE UNDERTAKEN TO ACHIEVE EDUCATIONAL OBJECTIVES
Indicate the specific activities you will perform to accomplish your objectives (e.g., library research visits, interviews, coding data, meetings with advisor, etc.)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

ESTIMATED NUMBER OF HOURS TO BE SPENT ON THIS STUDY WEEKLY
______________________________________________________________________________

FINAL PRODUCT
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________