CapitalUniversity OFFICE OF THE REGISTRAR

COURSE BY CONTRACT / INDIVIDUAL STUDY REQUEST

A Course by Contract (CC) refers to a regularly offered catalog course, which is not currently being offered, taught on an individual basis.

An Individual Study (IS) refers to an individualized course that is not listed in our regular curriculum and includes material not covered by a regular course catalog.

Please follow the steps below:

- 1. **Student** Complete page 1, then have your academic advisor sign on page 2 under the Approvals section. Once you have your advisor's signature, submit this form to the course instructor.
- 2. **Instructor** Complete the Instructor portion on page 2 and submit this form along with the course syllabus to your department's Administrative Assistant.
- 3. Administrative Assistant Have the Dean or Department Chair sign under Approvals. Attach the syllabus to this form and upload it to the <u>Course by Contract & Individual Study</u> folder in SharePoint. Notify the Provost's Office that it is available.
- 4. **Provost** If approved, sign under Approvals and notify the Registrar's Office that the document is complete.
- 5. **Registrar's Office** will build the section, register the student, and send a confirmation email to the student and instructor.

STUDENT

Complete page 1, have your advisor sign on page 2, then submit this form to the course instructor.

Name:		ID#:	
I Am R	equesting A(n):	□ INDIVIDUAL STUDY	
Course Subject & Number:		Credit Hours:	
Course Title:		Term:	
If requesting a course by contract: Why is it necessary to take this as a course by contract?			
	This course is not offered this semester and is not scheduled again before I graduate.		
	I am a non-traditional student and am not able to take the course at another time.		
	The time conflicts with this required course:		
	Other (explain):		
Please check all that apply: This course fulfills a major or minor requirement. Major/Minor: 			
	I will be a graduating senior this term.		

Student Signature: _

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INSTRUCTOR

The instructor will sign here and submit this form along with a copy of the syllabus to their department's Administrative Assistant.

Choose one of the following options:

- □ Faculty Compensation Requested (Course by Contract only)
- □ No Faculty Compensation Requested

Comments:	
Instructor Name:	-
Instructor Signature:	Date:

****AN ATTACHED SYLLABUS IS REQUIRED****

APPROVALS

The student's Academic Advisor, the Dean or Department Chair for the course, and the representative of the Provost's Office will sign their approvals below. The Provost's Office will then notify the Registrar's Office that the completed document is ready to be processed.

Advisor Signature:	Date:	
Dean/Dept. Chair Signature:	Date:	
	D. (
Provost Signature:	Date:	
Comments (optional):		