

SANTA BARBARA CITY COLLEGE

INDEPENDENT STUDY C

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INDEPENDENT STUDY CONTRACT

Part I (To be completed by Student)

Student Name _____

K# _____

Pipeline email _____

Part II (To be completed by Instructor)

Department _____

Division _____

Course Title (i.e., ART 299 Independent Study) _____

Hours _____

Units _____

For the semester/year, the above-named student has entered into an agreement to complete a program of Independent Study. Attach a sheet and state course objective(s), course outline, course outcomes, and special projects or activities.

Part III (To be completed by the Admissions and Records Office)

Units completed at SBCC _____

GPA _____

Units completed within the department _____

GPA _____

Verified _____

Date _____

Part IV (Required Signatures)

7KH LQVWUXFWRU LV WR VXSHUYLVH WKH VWXG\ SURJUDP RU SURM
final grade during the normal reporting period established by the Admissions and Records Office.

Student Name _____

Department Chair _____

Instructor _____

Academic Dean _____

Part V (To be completed by the Scheduling Office)

Section # _____

Course # _____

Date _____

Scheduling Office Approval _____

Copies: Scheduling Office (white), Admissions and Records (canary), Instructor (pink),
Student (goldenrod)