

Student-Designed Independent Study



Complete this form and have it signed by the faculty member, chair and dean in order to be registered for Student-Designed Independent Study. For questions, contact the Student-Directed Learning office, sdl@metrostate.edu.

Accessibility Resources: This document is available in alternative formats upon request, by contacting the Center for Accessibility Resources, at Accessibility.Resources@metrostate.edu or 651-793-1549. If you need disability-related accommodations, please contact the Center for Accessibility Resources.

Contact Information

Student Name:

Student ID#:

Metro Email:

Phone:

Major:

Advisor Name:

Course Information

Title:

(maximum of 75 characters):

Term:

Year:

Subject Code:

(for example ICS, PSYC, WRIT)

Grading option:

Number of Credits:

Level:

Student Signature to request registration:

Evaluator Information

Evaluator Name:

Tech ID:

E-mail:

Role:

Evaluator Signature:

Department Approval

Approved for Registration

Chair Signature:

College Approval

College:

Cost Center:

Approved for Registration

Approved for Faculty Work Assignment

College Dean Signature:

1. Competence Statement: Summarize your proposed course? What learning will you demonstrate?

2. Learning Outcomes: What are the specific learning outcomes you plan to achieve?

- If you are proposing that your SDIS count for General Education or RIGR, make sure to address those requirements.

3. Learning Process: What is your planned learning process? Describe your planned learning activities?

4. Resources: What resources will you use in your learning?

5. Assessment and Evaluation Methods: (check those that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> case study | <input type="checkbox"/> oral interview | <input type="checkbox"/> simulation |
| <input type="checkbox"/> certificate/license/exam | <input type="checkbox"/> portfolio | <input type="checkbox"/> other (describe below): |
| <input type="checkbox"/> essay | <input type="checkbox"/> presentation | |
| <input type="checkbox"/> journal | <input type="checkbox"/> project evaluation | |
| <input type="checkbox"/> objective test | <input type="checkbox"/> reflective paper | |
| <input type="checkbox"/> observation | <input type="checkbox"/> research paper | |

6. Who have you consulted on this proposal?