KENYON COLLEGE

**REGISTRATION FOR INDIVIDUAL STUDY**

**This form should be completed online and then printed to acquire signatures.**

LEGAL NAME _____ ID# _____

EMAIL ADDRESS _____ DATE _____

**A student may not create an Individual Study on the same content as a course being offered in a given semester.** (http://www.kenyon.edu/directories/offices-services/registrar/course-catalog-2/administrative-matters/course-enrollment-and-schedule-change-procedures/)

Students may enroll in an Individual Study **up to the seventh-class day**. Before a sponsoring faculty member or department chair approves an Individual Study, the student (consulting with the instructor) must complete this entire form for the IS based on the guidelines articulated in the department /program policy.

**Please provide a title that accurately describes your Individual Study (not Senior Thesis) 27 characters or less.**

| TERM | SUBJ. | OFFICE USE | TITLE – must be 27 characters, or less including spaces & punctuation | CREDIT AMT. |
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**To be completed by department chair:**

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Does this course count towards a major requirement?
If so, please indicate the specific requirement in the box.

PRINT INSTRUCTOR'S NAME _____

INSTRUCTOR'S SIGNATURE _____

ADVISOR'S SIGNATURE _____

DEPT OR PROGRAM CHAIR'S SIGNATURE _____

Office use only:

CRN # assigned _____

Date received in Registrar's Office _____ Date/by whom processed _____

I. Purpose
(Proposed Topic
Information)

II. Content

III. Assignments, Evaluation and Timeline