

**The UNIVERSITY of MONTANA WESTERN**  
**INDEPENDENT STUDY or DIRECTED STUDY CONTRACT**

**INSTRUCTIONS:** Complete one form per IS/DS course request. With assistance of the course instructor, answer all questions below in detail. Check or "X" appropriate spaces, etc. **PRINT** legibly. Provide ALL information requested in detail; incomplete or improperly completed forms will be rejected.  
**PROCEDURE:** Complete this form. Secure required approvals. Return completed form to the Registrar's Office when registering for or adding (submit an ADD card) the course requested; forms must be submitted before the start of the term listed below. Use the back of this form if necessary.

\_\_\_\_\_  
(Student Name - print)

\_\_\_\_\_  
(Student ID or SSN)

I am requesting approval to attempt (check IS **or** DS, provide detailed course information of DS course syllabus as requested):

\_\_\_\_\_  
**INDEPENDENT STUDY (IS) COURSE**---Course Title\* \_\_\_\_\_  
\*IS courses **may NOT** duplicate catalog course offerings.

Check Course Level: \_\_\_290 or 292, or \_\_\_490 or 492      Circle Number of Credit Hours: 1 cr   2 cr   3 cr   4 cr

\_\_\_\_\_  
**DIRECTED STUDY (DS) COURSE**---Course Title\* \_\_\_\_\_  
\*DS courses (duplicate catalog course offerings) NOT allowed if the course requested is a regularly scheduled offering during the term listed below.

List Course Number (see catalog listing): \_\_\_\_\_      List number of Credit Hours: \_\_\_\_\_

Department/rubric through which the course requested above will be offered: \_\_\_\_\_

Term **and** Year I will **complete**\* the course requested above: \_\_\_Fall \_\_\_Spring \_\_\_Summer      YEAR \_\_\_\_\_  
\*All work for the course must be completed on/by the end of the term listed, no time extensions (via grade changes or Incompletes) will be allowed.

Start date of class \_\_\_\_\_ Anticipated end date of class \_\_\_\_\_ -OR- Block number - \_\_\_\_\_

Are there additional lab/other course fees for the course identified above? \_\_\_NO \_\_\_YES-fee amount? \$\_\_\_\_\_

**COURSE OUTCOMES – list all, be very specific (for DS courses attach course syllabus listing specific course outcomes):**

**REQUIRED STUDENT ASSIGNMENTS - be specific/provide detail:**

**EVALUATION METHOD(S) – be specific/provide detail:**

\_\_\_\_\_  
(Student Signature)

\_\_\_\_\_  
(Today's Date)

E-mail Address:

**REQUIRED APPROVALS:**

How will this course be delivered (please check one)? \_\_\_online/internet \_\_\_face-to-face \_\_\_blended (online & F2F) \_\_\_challenge test \_\_\_other

Course Instructor - \_\_\_\_\_ Date \_\_\_\_\_

Department Chair - \_\_\_\_\_ Date \_\_\_\_\_

Provost - \_\_\_\_\_ Date \_\_\_\_\_