



INDEPENDENT STUDY PROPOSAL

Date: _____ / _____ / _____

Student Name: _____

Grade: _____ Graduation Year: _____

1. Area of study covered by Independent Study:
2. Activities to be carried out during Independent Study.
3. Evidence the student will produce indicating the progress being made throughout the Independent Study.
4. Procedure used in evaluating the Independent Study.
5. Amount of credit to be received for Independent Study? _____

We the undersigned agree to the above outlined proposal.

_____ / / / _____
Student Date

_____ / / / _____
Supervising Teacher Date

_____ / / / _____
PrincipalDate

*Attach additional sheets if necessary.