



WASHINGTON STATE UNIVERSITY  
**College of Education,  
 Sport, and Human Sciences**

**Department of Educational Leadership and Sport Management  
 Department of Kinesiology and Educational Psychology**

**Independent Study Form for Ed\_Ad, Spmgt, Kines, and Ed\_Psych**

For the following course numbers: 600, 700, 702 & 800

**Student's Name:** \_\_\_\_\_ **WSU ID:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** ( ) \_\_\_\_\_

**Semester (check box):** Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ **Year:** \_\_\_\_\_

**Course Major:** Ed Ad \_\_\_\_\_ Ed Psych \_\_\_\_\_ Kines \_\_\_\_\_ Spt Mgmt \_\_\_\_\_

**Course Number:** \_\_\_\_\_ **Number of Credits:** \_\_\_\_\_

**Project Title:** \_\_\_\_\_

**DESCRIBE** the project to be undertaken. In the description, please also include a statement of the goals and benefits of the project, a plan for completion, a plan for supervision, a description of the resources required, and an estimate of the average number of hours per week to be devoted to the project.

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**DESCRIBE** the method of evaluation. In the description, give the specific performance criteria upon which the evaluation will be made and grade assigned.

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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Printed Name: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This form must be completed by the student and faculty and then returned to the Office of Graduate Education (gradstudies@wsu.edu) no later than the 5<sup>th</sup> days of term.**