



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 Name: _____ WSU ID: _____

Email: _____ Semester: _____ Year: _____

Course Prefix and Course Number: _____ Number of Credits: _____

Faculty Name: _____

Are credits meeting the Graduate School Requirement for a Full-Time Student, if yes, check box: ☐

Note: 1 credit equals 3 hours of work per week.

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.

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

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Department Chair Signature: _____ Date: _____

1. Student: After enrolling in your credits, work with advisor to complete the form with signatures.
2. Advisor: Sign and date the form and send a copy to Miguel Negrete (miguel.negrete@wsu.edu) by the 5th day of classes. Include your advisee on the email to Miguel so that everyone has a copy.