

EAST LYME HIGH SCHOOL INDEPENDENT STUDY APPLICATION



Student Name: _____

Grade: (circle one)	9	10	11	12	Length of Course:	
Semester: (circle one)	1	2			Credits to be awarded: (90 hours course work=.5 credits)	

Course Title: _____

Meeting Time: _____ (Must be during study hall & when teacher is free)

Grading for Independent Study courses is Pass/Fail unless otherwise approved by Principal.

STUDENT SECTION:

1. Purpose of Independent Study (why do you want to take this class?)

2. Objectives (What do you want to learn? What new learning will occur?)

3. Materials (What will you need for the class?)

TEACHER SECTION:

1. Description of study and objectives:

2. Method of evaluation / assessment:

Requested grading: Pass Fail or Letter Grade (circle one)

Required Signatures:

Student: _____

Parent/ Guardian: _____

Teacher: _____

CIL: _____

Counselor: _____

Principal: _____

Registrar added to schedule

