

# Point University

## INDEPENDENT STUDY PERMISSION FORM

### Office of the Registrar

507 West 10<sup>th</sup> Street  
West Point, GA 31833  
706-385-1018 (phone) 706-645-9475 (fax)

Permission for independent study is to be granted only when there is a conflict between two courses in the schedule. Permission to take a course independently must be granted by the registrar before approaching the professor. Adjunct instructors will not be asked to supervise independent study courses.

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Independent Study Term: \_\_\_\_\_  
Social Security Number

\_\_\_\_\_ Student Name \_\_\_\_\_ Signature of the Professor

\_\_\_\_\_ Street Address

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP

Point University Course Needed			Course Causing Conflict		
Course Number	Course Title	Hours	Course Number	Course Title	Hours

All independent study courses must be approved by the registrar and the course professor. It is the sole responsibility of the student to contact the professor for the course syllabus, schedule of exams, papers, etc. All work must be completed within the semester designated above.

*I understand the independent study policy of Point University and request permission to take the course listed above.*

\_\_\_\_\_ Student's Signature

### To be Completed by the Registrar

This student

\_\_\_\_\_ must complete this work no later than \_\_\_\_\_  
\_\_\_\_\_ has the registrar's approval for any of the courses listed above  
\_\_\_\_\_ has completed the course and the grade has been received and recorded: \_\_\_\_\_  
Date

\_\_\_\_\_ Registrar

\_\_\_\_\_ Date