INDEPENDENT STUDY APPLICATION FORM Regulations and Guidelines

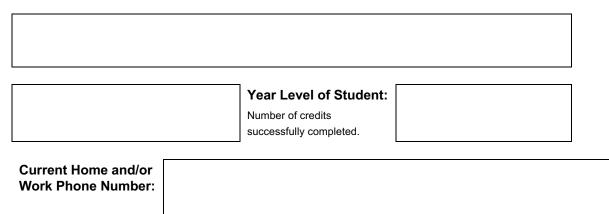
Students may pursue an Independent Study Course with a Faculty Member on a subject/area/topic which is not offered through the Program's current courses. Such a request must be approved in writing by the Graduate Program Director. Interested students are strongly encouraged to meet with the Graduate Program Director in advance before finalizing a plan to explore this option.

The student must submit a formal request that contains the following:

- i) A title of the proposed course
- ii) A detailed description of the course, which will include, among other things, the objectives of the course, and the issues/topics the course plans to cover;
- iii) The source materials/texts that the course plans to use / adopt

The proposed outline will also spell out the ways in which (structure) the course will be organized, including the number of face-to-face meetings, and the duration of the meeting. An assessment criterion, in other words, a detailed breakdown of grades also needs to be included in the proposal.

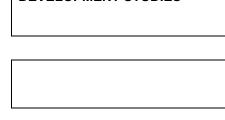
Student Information



Independent Study Course Information

DEVELOPMENT STUDIES

Effective Term:



Course Number: DVST 5000

Credit Value:

3.0 CREDIT

Course Title:

This title will appear on your York University Transcript. Maximum 40 characters, including punctuation and spaces.

Brief Course Description:

The course description should be carefully written to convey what the course is about. For editorial consistency, verbs should be in the present tense. Maximum 40 words or 200 characters.

Representative Bibliography:

Please list books, essays, articles, films, etc. that will be used as reference materials for this course. If the space provided is not adequate, please attach a separate sheet to this application form.

Evaluation:

Please provide a description of the basis of evaluation for the course, including the type, percentage value, and due date of each assignment.

Instruction:

Please indicate the frequency of meetings between the student and supervisor(s).

Name of Supervisor (please print)

Signature of Supervisor

Signature of Student

Signature of Program Director

Please return to Development Studies Program Office

Date

Date

Date