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|  | Department of Sociology**SOC 403*****INDIVIDUAL STUDY FORM*** |

**Description**: Individual study on topic for which no course is currently offered by the Department.

**Pre-requisite**: Consent of instructor and the Associate Chair, Undergraduate.

**Student Information**

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| --- | --- | --- | --- |
| Name |  | ID Number |  |
| Telephone |  | E-Mail |  |

**Course Information**

**Academic Year:** ( 20\_ \_ - 20\_ \_ ) **Term:** *(circle one)* FALL WINTER SPRING SUMMER

**Completion Date:**  Last day of classes for the term (at the latest)

**Course Title**: *(No longer than 50 characters including spaces)*

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| **Description** |  |
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| **Objectives** |  |
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|  |  |
| **Instructor****Contact Hours** | (e.g. 1 hour per week) |
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| **Requirements** | (e.g. report size) |
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| **Grading** | (Indicate % of the final mark that will be allocated for discussion, written report, term paper, etc.) |
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It is understood that the student will be physically present on campus for the term in which he/she is registered in the SOC 403 course. If this is not the case, please indicate the reason for any absence below:

If the student intends to be off-campus for the term or portion thereof and register in SOC 403, he/she is subject to the Off-Campus Activity and Travel Policy. http://www.offcampusactivity.ualberta.ca/RiskAssessment.aspx

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| Student Signature |  | Date |  |
| Course Instructor (please print) |  |  |
| Course Instructor Signature |  | Date |  |
| Associate Chair Undergraduate / Designate |  | Date |  |

*Please submit completed form to the Undergraduate Advisor in 5 – 27 Tory. Thank you.*

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| **Department Office Use Only:** Date Course Section Scheduled \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Department Registered Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |