

**TEMPLE UNIVERSITY
COLLEGE OF LIBERAL ARTS
AFRICOLOGY AND AFRICAN AMERICAN STUDIES
DEPARTMENT
Independent Study Form**

(This is a 5-page form, which includes the petition and the contract, and it can be downloaded from our website:

<https://www.cla.temple.edu/africology-and-african-american-studies/>

How to access the form: Ask Ms. Tammey Abner, Coordinator
Phone 1-8491 email: tammey.abner@temple.edu

Hard copies should be submitted to Professor Molefi K. Asante (Chair) and Professor Nilgun Anadolu-Okur at the time of application. No email please.

**INDEPENDENT STUDY PETITION AND APPLICATION FORM FOR AAAS
Undergraduate and Graduate Students**

Date:

Course Number) _____

Semester: _____

Year:

Name of the Applicant:

TU ID:

Undergraduate

Graduate

Please read the following carefully before completing the attached form. This is a two-part form, including the petition and the contract. By the end of the semester the professor has to attach the student's graded paper to this form and submit it to the department. All independent study petitions, contracts and graded papers will be stored in the department for future reference.

Independent Study is based upon request (through this petition) and a student's critical needs. Throughout your tenure you are allowed to have only three (3) independent study courses on your transcript. Only one (1) independent study course is allowed per year. Please remember that we do our best to assist our students however you may not be automatically granted permission for an independent study. Also remember that you may not be allowed to have three independent studies with the same professor.

Please explain the reason(s) for your request in this form.

IMPORTANT: Teaching Assistants and Adjunct Instructors are not eligible to conduct independent study courses.

What is independent study?

Goals and Limitations:

Independent study is a one-semester course based upon research conducted through weekly or bi-monthly meetings with the professor. Final grade for the course is obtained through consistent attendance, active participation in research, superior academic performance as well as following the instructions of your professor.

Primarily the course work will be carried out by research (the student) and by guidance (the professor) and ultimately presented in the form of an academic research paper, written in English. The scope of the research will be determined after an initial meeting with the professor who has agreed to conduct your independent study course. If necessary, the professor may consult the chair, or another professor in the department. Before you do anything else please make sure your professor has agreed to conduct your independent study course. A brief note from the professor is recommended.

Prior to acceptance and confirmation of your request both by the department Chairperson, and the Undergraduate Chair (for Undergraduate students) or the Graduate Chair (for Graduate students) all applicants must submit a petition and agree to be interviewed, by the Chair, if necessary. A GPA of 2.9 is the minimum acceptance at the time of application, and preference will be given to GPAs above 3.0.

There is no prerequisite for the independent study however you need to fulfill the contract requirements fully and submit the completed paper both to your professor, and the Undergraduate or Graduate Chair (two sets - hard copies only) **no later than the 10th week of the semester. For fall semester the date is November 1 and 2, for spring semester April 15 and 16.** The research paper should follow the rules of APA, MLA or Chicago styles, is referenced accordingly with a bibliography, and is between 30-40 double spaced pages.

PART 1: Petition

PETITION TO REGISTER FOR INDEPENDENT STUDY IN
AFRICOLOGY AND AFRICAN AMERICAN STUDIES
DEPARTMENT

Print your NAME:

Last name

First name

MAILING ADDRESS

TELEPHONE NUMBER

E-MAIL

STUDENT ID NUMBER

MAJOR _____ **MINOR** _____

Name of the DEPARTMENTAL Instructor: (PLEASE PRINT)

(Reference letter in support of the student should be attached to this form if applicable).

Signature:

Email:

Please check one:

Presently: **FRESHMAN** [] **SOPHOMORE** [] **JUNIOR** [] **SENIOR**
[] **GRADUATE** []

I (Please print your Name) REQUEST to register for Independent Study during (Semester) and work with Professor (Print the name of the professor) who has agreed to guide me for the following research project:

Title of the project:

.....

ABSTRACT (DESCRIBE the title and scope of the project): 200 words min, 250 max.

Reason for the request and Date for completion of the Work:

State the need:

OTHER: (Please Explain)

.....

Current GPA _____

Confirmation of the GPA by the Department Coordinator: **YES** [] **NO** []

PART 2: Contract

CONTRACT for INDEPENDENT STUDY IN AFRICOLOGY AND AFRICAN AMERICAN STUDIES DEPARTMENT

DO YOU UNDERSTAND THE RIGOROUS NATURE AND SPECIAL REQUIREMENTS OF THE INDEPENDENT STUDY AND AGREE TO COMPLY WITH THESE REQUIREMENTS?

YES []

NO []

Student's signature

Date

Faculty's signature

Date

Note: Evaluator(s) use opposite side for any comments.

STATUS OF THE APPEAL (please mark one of the following)

CONFIRMED:

REJECTED:

PENDING:

**Chair and Professor M.K. ASANTE
SIGNATURE:**

**Professor Nilgun A. OKUR
SIGNATURE:**

.....
(This section to be filled by the departmental coordinator)

Grade received by the student:

Professor's name and signature:

Date: