

Independent Study / Internship Contract



Registrar@usca.edu - (803) 641-3550 – Penland 109

All signatures are required and must be obtained prior to registration. Electronic signatures are acceptable if the completed form is sent to the Office of the Registrar for processing directly by the instructor, dean, or department chair. Send form to Registrar@usca.edu or bring to Penland suite 109.

Student Information:

Full Name: _____ Degree requirement this course will fulfill: _____
USC or VIP ID: _____ Major Cognate
USC Aiken Email: _____ Minor Elective/Not Required
Major: _____

Student signature*: _____ **Date:** _____

*By signing and submitting this form, you understand that you are liable for all tuition and fee costs associated with course registration.

Course Information:

Subject: _____ Number: _____ Section (if known): _____ CRN (if known): _____

Course Credits: _____

Term: **FALL** (select one of the following): full semester first half only second half only
 SPRING (select one of the following): full semester first half only second half only
 SUMMER (select all that apply): Maymester Summer I Summer II

Year: _____

Method of Instruction / Supervision: Face-to-Face Blended/Hybrid 100% Online

Topic of Course, Research, or Internship (will appear on student's academic record): _____

Course Summary and Objectives:

Method(s) of Evaluation: _____

Required Textbooks, Sources, and Materials: _____

Notes (funding, approval numbers, other): _____

Instructor Name: _____ Instructor USC or VIP ID: _____

Instructor signature: _____ **Date:** _____

Additional Authorizations / Signatures

Student's Academic Advisor: _____ Date: _____

Dean or Department Chair of Course Subject: _____ Date: _____

Office of the Registrar

Subject _____ Number _____ Section _____ CRN _____ Hold Registered