# School of Environmental & Forest Sciences

## INDEPENDENT STUDY, PRACTICUM, OR INTERNSHP COURSE REGISTRATION REQUEST FORM:

Advising Office Only

Credits Approved:      \_

Student Registered **[ ]**

Student Notified: **[ ]**

**INSTRUCTIONS:**

1. Consult with your faculty adviser to decide what tasks and products will be completed for the credits. Maximum credits each quarter for each type of registration are listed below – for any exception to this please consult the Graduate Program Advisor (GPA) in advance.

2. Develop a brief written description of the work to be accomplished. This description should be pasted into the “Description of Work” area below on this form. Do not exceed one page of text. Please address these five areas:

 a. Learning Goals/Objectives d. Timeline: due dates for meetings, tasks, deliverables

 b. Brief Description of Tasks e. Method of Evaluation

 c. Expected Outcomes, Products, Deliverables

3. Save the form to your own computer, fill in all the fields. Once filled out, print, sign as Student, and obtain your faculty advisor’s signature. Or if submitting electronically, save as PDF, sign in the student area, and send to your faculty advisor to approve. (See signature block on page two.)

4. An email from your faculty adviser (from their UW email address) approving the completed form and your enrollment in independent study credits can be used in lieu of a physical signature. ***You need to provide the full email including the “From” fields, subject line, and date.***. PDF the email, and submit with this form.

5. Submit the signed form to SEFS Advising. If submitting an email in lieu of faculty signature, please PDF the full email showing your faculty approval, and submit with your form. To submit a printed paper form, put in the Advising mailbox in Anderson Hall. To submit electronically, go here: [**Submit Forms to SEFS Advising Here**](https://tinyurl.com/SEFSGradFormsUploads)

6. Timing: Allow for a minimum of ***10 business days*** for this paperwork to get processed once submitted. Please plan accordingly, and pay attention to registration deadlines to avoid unwanted fees. Any fees imposed by the UW for late registration are the responsibility of the student. **Late fees of various kinds start on the first day of a quarter.**

***7. NOTE:*** ***SEFS Advising recommends strongly to submit this paperwork at least 2 weeks prior to the quarter starting! Advising will not be able to reverse any late fees unless it is due to institutional errors!***

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| --- | --- |
| Student Name: |       |
|  |  |  |  |
| Student Number |       | Student UW Email |       |

**Requesting Registration for: QUARTER:** **YEAR:** **NUMBER OF CREDITS:**

**CHECK ONE:**

 **[ ]**  **SLN Code:** \_     \_ **SEFS 595** – Graduate Teaching Practicum (1 – 5 credits, max. of 5)

 **[ ]  SLN Code** \_     \_ **SEFS 601** – Internship (3 – 9 credits, max. of 9)

 **[ ]**  **SLN Code** \_     \_ **SEFS 600** – Independent Study or Research (1-10 credits, Credit/No Credit)

 (Only use 600 if doing work NOT related to your thesis or dissertation activities.)

 **[ ]  SLN Code** \_     \_ **SEFS 700** – Master’s Thesis (1-10 credits, Credit/No Credit)

 (Use 700 for all MS degree research and thesis related activities, exams, and writing.)

 **[ ]  SLN Code** \_     \_ **SEFS 800** – Doctoral Dissertation (1-10 credits, Credit/No Credit)

 (Use 800 for all PhD degree research and thesis related activities, exams, and writing.)

**Description of Work: Address the five topic areas below with specifics. Fill in each section separately:**

***Be specific to your activities, progression, deliverables, and exams for the quarter in which you are requesting credits.***

1. **Learning Goals / Objectives:**
2. **Brief Description of Tasks:**
3. **Expected Outcomes, Products, Deliverables:**
4. **Timeline: due dates for meetings, tasks, deliverables**
5. **Method of Evauluation:**

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| --- | --- | --- | --- | --- |
| **STUDENT:** | Signature: |       | Date: |       |
|  |  |  |  |  |
| **FACULTY ADVISER:** | Name: |       |  |  |
|  |  | *(printed or typed please)* |  |  |
|  | Signature: |       | Date |       |
|  |  | *(If submitting email in lieu of signature, indicate this in above field. Attach / Submit a full PDF copy of the email including the header information such as date sent, from email, to email, subject line.* |
|  |  |  |  |  |