**Office Use Only**

Date Received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course Number\_\_\_\_\_\_\_\_\_\_\_ Section\_\_\_\_\_\_

Update REG\_\_\_\_\_\_ Update SIS\_\_\_\_\_\_

**Residential MBA Independent Study Proposal**

Independent Studies provide an opportunity for a faculty member to offer a one-time learning experience for an individual student or a small group of students. Electives in this category allow the student(s) to focus deeply on a specialized topic, address a specific challenge facing a firm, or learn from developing a venture.

Independent studies are not part of the standard bidding and registration process.

***A broad set of experiences qualify as an independent study. Please select one below:***

Case Development

Research Project

Consulting Project

Venturing Project

**NOTE: No more than 4.5 credit hours of Independent Study can be applied toward Graduation.**

Today’s Date: Click or tap to enter a date.

Student Name(s): Click or tap here to enter text.

Student Email(s): Click or tap here to enter text.

Project Name: Click or tap here to enter text.

Supervising Faculty Printed Name: Click or tap here to enter text.

***\*Faculty signature required below***

Course Credit hours (select one):  1.5  3.0

When do you plan to complete the Independent Study? (select one):

Quarter 1  Quarter 2  Quarter 3  Quarter 4

**\*Supervising Faculty Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please state and describe the goal of the independent study:

What do you plan to do? Please provide a detailed description.

Please describe the learning outcomes for the student?

What are the deliverables?

Please provide information on any overlap (if any) between your independent study topic and topics covered in Darden’s regular course offerings. An independent study cannot cover the same material covered in a regular Darden course.

Please list all other independent studies you have taken or are currently applying for and the faculty supervisor for that study. If the current proposal is related to any of these studies, describe the extent to which the current proposal differs from the prior proposal.

Return Completed Form (including supervising faculty signature) to:

**Office of the Registrar 112 Saunders Hall**

*You will be contacted by the Registrar’s office when the proposal has been approved by the MBA Associate Dean and you are enrolled in the course.*

**Associate Dean Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**