

EDIFIDE
APPLICATION FOR INDEPENDENT STUDY
revised March 2012

I, _____ hereby request approval that the requirement
name of applicant
for Area of Study ____ of the CSTC may be satisfied with an Independent Study as described in
the attached proposal.

PROCEDURE

1. **Proposal** for Independent Study should be **one page** and attached to this application.
The following information must be included:
 - Title of the study
 - Time plan for the study including date of completion
 - Description of the study including goals, objectives, procedures and resources
 - Explanation as to how this project will meet the expectations of the area of study **and** a Reformed perspective.
 - Supervisor's form: A supervisor may be a principal, a professor of education at a Christian university, or some other person who is qualified to supervise and evaluate the study. The application must include the supervisor's name, position, qualifications and agreement to act as supervisor of the study using the attached form.

Supervisor Form

Name: _____

Qualifications: _____

Relationship to applicant: _____

I hereby agree to supervise the independent study of _____
name of applicant

and agree to provide a written evaluation of the study for the Edifide Credentials Committee upon
completion.

signature

date

2. **Approval** of proposal by the Edifide Credentials Committee

The Edifide Credentials Committee hereby accepts the attached proposed independent study.	
Date:	_____
Signature:	_____

3. **Completion** of the independent study within the proposed time frame.

4. **Verification** of the completed study and comments by supervisor sent to the Edifide office to the attention of the Credentials Committee using the following form.

I, _____ verify that <i>name of supervisor</i>
_____ has successfully <i>name of teacher</i>
completed the independent study _____ <i>title</i>
A written evaluation is attached.
Signature: _____
Date: _____