Undergraduate
Independent Study Form
L A 490

Student Name ________________________________  Major ________________________________

Email Address ___________________________  ID Number _______  Term/Year _______

Credit 1-4, Fall, Spring, Summer. Prereq: Written approval of instructor and program director on required form. Investigation of an approved topic of special interest to the student. Election of course and topic must be approved in advance. To be submitted to the department chair with all other signatures in place no later than the 3rd week of the semester in which enrollment is requested.

LA 490 is a contractual agreement between student and instructor. The person who requests the study is responsible for proposing its central idea. The details then must be negotiated between the student and a faculty person who has the time, interest, and qualifications to supervise the work. Mutual agreement must be reached before work can begin or indeed, before enrollment in the course can be secured. Completion of this form, including its signatures, is a precondition for enrollment in LA 490.

Select Topic:

☐ L A 490A - Landscape Design  ☐ L A 490B - Planting Design  ☐ L A 490C - Construction  ☐ L A 490D - History
☐ L A 490I - Interdisciplinary Studies  ☐ L A 490J - International Studies  ☐ L A 490K - Computer Applications
☐ L A 490L - Ecological Design  ☐ L A 490M - Social/Behavioral  ☐ L A 490N - Natural Resources

Section ______  Credits (1-4) ______  Instructor’s Name: ________________________________

Description of content and objectives of the course:

__________________________________________________________________________________

Requirements for successful completion:

__________________________________________________________________________________

Meeting Arrangements (Days/Time):

__________________________________________________________________________________

Where will this course apply for degree requirements?

__________________________________________________________________________________

Signatures Required for Approval:

Student ______________________  Date ______

Instructor ______________________  Date ______

Advisor _______________________  Date ______

Chair of Department ______________  Date ______

After approval, the student emails this form to design-ss@iastate.edu.
To register for the course, prepare a digital Schedule Change form, found in AccessPlus.