## Department of Psychology INDEPENDENT COURSE APPROVAL FORM

The information on the Independent Course Approval Form is reviewed by the Department of Psychology Undergraduate Committee or by a Department of Psychology faculty member to define the amount of Utah State University credit that may be earned by the student on that project. The amount of time required to earn one semester credit in an Independent Course is determined by nature of the project and the student's duties within the project as well as if the time spent is unpaid or paid.

National guidelines dictate that students complete 75 hours of psychology-related paid employment to earn one University semester credit.

Sixty (60) unpaid hours per semester credit is required when the activity is mostly, but not entirely, psychologyrelated and the role of the student is to observe, assist, and implement a predetermined exercise. The supervisor usually is not a USU faculty member.

Forty-five (45) unpaid hours per semester credit is required when the activity is entirely psychology-related and when, in addition to assisting, the student is given some responsibilities within the project and is included in planning and evaluation discussions. The supervisor may or may not be a USU faculty member.

Thirty (30) unpaid hours per semester credit is required when the student is creatively involved in any part of the project proposal, design, implementation, or evaluation and/or routinely participates in decision making and is significantly responsible for the project. The supervisor is usually a USU faculty member.

## Grades for credit in Independent courses are on a P-F basis.

**INSTRUCTIONS:** This form must be used to obtain approval to register for the following psychology courses. Use one form for each project. Approved forms may be received and filed until the last day to register or add classes for the current semester. Choose the course number and description that best matches the activities/project as determined by you and your supervisor.

- **PSY 2250** Introductory Cooperative Work Experience Educators and employers cooperate to provide opportunities for students to apply classroom theory and principles in job environments, thereby gaining practical experience in their field. (Paid or Volunteer.) \*Text required. Graded P-F.
- **PSY 4250** Advanced Cooperative Work Experience Cooperative education work experience position; increased level of complexity and a more professional level of experience as student advances toward completion of the program. (Paid or Volunteer.) \*Text required. Graded P-F.
- **PSY 4910** Undergraduate Research Creative Opportunity (URCO) Opportunities for students to suggest and carry out a creative project related to psychology. Graded P-F.
- **PSY 4920** Practicum Field experience in psychological settings at the bachelor level. (Unpaid.) \*Text required. Graded P-F.

\*Required Text for Psy 2250, 4250, 4920: *Student Manual Cooperation Education*. Download from http://www.usu.edu/career/htm/students/obtain-an-internship/coopmanual

**PSY 5900** Independent Study - Opportunities for a student to study in-depth a topic of interest in psychology. Graded P-F.

- **PSY 5910** Independent Research Opportunities for a student to conduct or aid in a research project dealing with psychology. Graded P-F.
- **PSY 5930** Instructional Apprenticeship Allows a student to serve as an aid in a psychology class. Graded P-F.

When the student has obtained supervisory and faculty approval and signatures, this form completed on the reverse side and a detailed description of the proposed project should be returned to: Psychology Undergraduate Advising Office, ED 475

UPON RETURN OF COMPLETED FORM, AUTHORIZATION WILL BE GIVEN ALLOWING COURSE REGISTRATION.

**INDEPENDENT COURSE APPROVAL FORM** Please read instructions/information on reverse side before completing this form.

| Upon completion, return to | ED 475; you will receive | authorization to register for                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | the course listed below. |  |
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| Address: City:             |                          | I am registering for Psy Course #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |  |
| State: Zip:                | Phone:                   | Semester:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Year: Credits:           |  |
| Major:                     | Ethnicity:               | Unpaid Position                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Paid Position            |  |
| Are your classes on campu  | 0 1                      | isor and grading criteria atta<br>ing classes?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | iched where available    |  |
| My Direct Supervisor will  | be : Date submitted:     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |  |
| Name:                      | Title:                   | Organization:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |  |
| Email:                     |                          | Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |  |
| My Faculty Supervisor wil  | 1 be:                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |  |
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| Faculty Supervisor Ema     | il:                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |  |
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A brief description of my project: