

# INDEPENDENT STUDY SYLLABUS FORM

## SOWK 8309 (3 credit hours)

The University of Georgia School of Social Work PhD Program

*An independent study with a School of Social Work faculty member must start with a "mini syllabus" of the course. Complete the sections below and obtain the signature of the faculty member with whom you will be studying. Sign and date the form and return to the PhD Program Office.*

**STUDENT NAME:** \_\_\_\_\_ **ID #** \_\_\_\_\_

**FACULTY MEMBER NAME:** \_\_\_\_\_ **SEM/YEAR** \_\_\_\_\_

**COURSE DESCRIPTION: (50 words or less)**

**COURSE OBJECTIVES OR EXPECTED LEARNING OUTCOMES**

**TOPICAL OUTLINE** *Please list the topics that you will be covering in this course.*

### APPROVALS

Faculty Member Name (PRINT)	Signature	Date
Student Name (PRINT)	Signature	Date
Jeremy Gibbs	Signature	Date
Program Director Name (PRINT)	Signature	Date

**Program Office Use Only – Do Not Write Below this Line**

**SEMESTER/YR** \_\_\_\_\_ **CRN** \_\_\_\_\_