



**INDEPENDENT STUDY SELF-ASSESSMENT FORM AND EVALUATION**

**Part I (To be completed by the student)**

Name \_\_\_\_\_ Student ID Number **U** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Period \_\_\_\_\_ Dept \_\_\_\_\_

**List learning objectives and work products (from the independent study application form)**

	Objectives	Work Products
1		
2		
3		

**Please evaluate the extent to which the above objectives were achieved**

1.	
2.	
3.	
4.	
5.	

**What challenges or obstacles did you experience during this independent study?**

**Given the opportunity, what would you have changed about this independent study?**

**How much do you think you have learned in this independent study as compared to other courses you have taken this year?**

**How well did this independent study meet your expectations?**

**Overall, what contributed most significantly to your learning in this independent study? What was the most important feature to retain?**

**Do you have any additional comments about this independent study?**

**Student signature**

**Date**

