

# Independent Focus Course Request Form



**Huron**  
UNIVERSITY

FACULTY OF THEOLOGY

**MA Theology, Huron University College**

Student Name \_\_\_\_\_ Student Number \_\_\_\_\_

Instructor \_\_\_\_\_ MA Theology Member? \_\_\_\_\_

Topic \_\_\_\_\_

Year/Term \_\_\_\_\_

## **Please Note:**

- 1) This IFC Course must be approved by both the Chair of Graduate Studies and the Dean of Theology.
- 2) The IFC Course Request Form must be accompanied by a syllabus providing the following:  
brief description of topic; \_\_\_\_\_  
projected learning outcomes; \_\_\_\_\_  
details about number, focus, and schedule of individual meetings; \_\_\_\_\_  
written assignments and evaluation schema; \_\_\_\_\_  
and a detailed bibliography/reading list. \_\_\_\_\_
- 3) The course number (e.g. Theo 9xxx) will be assigned by the Graduate Assistant in consultation with the Chair of Graduate Studies; students must not register for more than one IFC under the same number.
- 4) This form is due with the Graduate Assistant AT LEAST one week before the last day to add a course in the term of registration.

## **Signatures**

Student \_\_\_\_\_ Date \_\_\_\_\_

Instructor \_\_\_\_\_ Date \_\_\_\_\_

Grad Chair \_\_\_\_\_ Date \_\_\_\_\_

Dean \_\_\_\_\_ Date \_\_\_\_\_

## **FOR OFFICE USE ONLY**

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**Course Number:** \_\_\_\_\_

**Dean's Note:** Stipend \_\_\_\_\_ Quarter-Course Bank \_\_\_\_\_