

Rice Lake High School  
Independent Study Course Request Form

Student's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Course Information

Name of Course: \_\_\_\_\_

Department: \_\_\_\_\_

Teacher: \_\_\_\_\_

Term: \_\_\_\_\_

Period: \_\_\_\_\_

Use the space below to describe how this area of independent study relates to your post-secondary goal.

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Teacher Recommendations

Recommendation #1 (to be completed by the teacher of the Independent Study course)

\_\_\_\_\_ I agree that the above student is able to work independently, follow safety guidelines and procedures, and has documented ability to follow school attendance and behavioral expectations.

\_\_\_\_\_ The student has passed all of the pre-requisite coursework with a grade of B or higher and/or the student has teacher approval.

\_\_\_\_\_  
(Teacher's Signature)

\_\_\_\_\_  
(Date)

Recommendation #2 (to be completed by another teacher the student has had)

\_\_\_\_\_ I agree that the above student is able to work independently, follow safety guidelines and procedures, and has documented ability to follow school attendance and behavioral expectations.

\_\_\_\_\_  
(Teacher's Signature)

\_\_\_\_\_  
(Date)

\*Turn completed form in to your counselor no later than one term before the Independent Study is to take place. Include an outline of what will be completed during the course.