Worcester Polytechnic Institute
Office of the Registrar

Undergraduate Independent Study (ISP) Registration Form

Instructions: Please complete all questions and obtain authorizing signature(s) from your ISP advisor(s). Return form to the Registrar's Office.

PLEASE PRINT

Name: ___________________________ Student ID: ___________________________

Class Year: ____________ Major: __________________________

1. Is this ISP Activity a substitution for a specific WPI course on the degree audit?
   □ YES, Subject __________________ Course #: __________________ Course Name: __________________________
   □ NO, Please specify exactly where on the degree audit this ISP should be used.
   □ ISP should be used to satisfy this specific requirement on audit: __________________________
   OR
   □ ISP does not satisfy a specific requirement on audit and will just be used as a Free Elective.

2. ISP Information

   Subject Code (Ex: ME): _______ Title of ISP: __________________________

   Please print advisor name: __________________________ ISP Advisor Initials: __________________________

   Term of ISP registration: ____________ Amount of Units/Credit: __________________________

   Level of ISP: □ 1000 □ 2000 □ 3000 □ 4000

3. Student Signature: __________________________ Date: ____________

4. ISP Advisor Signature: __________________________ Date: ____________

5. Capstone Design Experience: Does this ISP meet the Capstone Design for this student's respective major or minor?
   □ Yes ISP Advisor Capstone signature: __________________________ Date: ____________
   □ No (Signature required for Capstone)

6. Academic advisor's signature is required ONLY if this ISP will put the student into an academic and/or financial overload.
   Academic Advisor: __________________________ Date: ____________

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dr:9/9/15