Academic Proposal Application - Disciplinary Credit

**University of Lethbridge Applied Studies**

**Academic Proposal Application**

Students applying for an Applied Studies course at the University of Lethbridge need to submit a Work Placement Application and Academic Proposal Application.

This Academic Proposal Application will need to be approved by an Applied Studies Instructor before being sent to your Academic Supervisor and Department/Area Chair for final approval. Once all documents have been approved, an Applied Studies Instructor will register you for your course and send confirmation.

Student's First Name

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Student’s Last Name

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Student’s University of Lethbridge Email

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Student’s ID Number

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Consulting Applied Studies Instructor

* Select the name of the Applied Studies Instructor that has been consulting you.

Degree

* Bachelor of Arts
* Bachelor of Education
* Bachelor of Fine Arts
* Bachelor of Health Sciences
* Bachelor of Management
* Bachelor of Music
* Bachelor of Nursing
* Bachelor of Science

Major(s)

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Minor(s), if applicable

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Year of Study

* 1
* 2
* 3
* 4
* Other

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| --- |
|  |

Cumulative GPA

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Applied Studies Semester

* Fall
* Spring
* Summer

Academic year you are taking the course

* Select year

Applied Studies Course Department/Area (ex. Kinesiology, Art, Psychology)

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Applied Study Course Level    
Based on conversations with your Academic Supervisor

* 2980
* 3980
* 4980

Liberal Education Designation

* Fine Arts/ Humanities
* Science
* Social Science
* No designation

Proposed Course Title (limited to 100 characters)

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Academic Supervisor's Name

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Academic Supervisor's Email

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Academic Supervisor's Department/Area  
 *(ex. Kinesiology, Art, Psychology, etc.)*

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If your Academic Supervisor has provided a syllabus or additional documents relevant to your course, please upload it here. (optional)

Upload #1 (optional)

What are you hoping to achieve through this course?  Tell us in approximately 300 words how the work placement and academic project will help you accomplish these goals.

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What is the preliminary focus of your academic paper/project? What questions, research, theories, and/or academic concepts do you wish to pursue in relation to your work placement?

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How does your Academic Supervisor's area of expertise relate to the focus of your academic paper/project?

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I certify that the details furnished are true and complete in all respects, and that no information has been withheld. I understand that falsifying documents or information on this application will result in immediate permanent dismissal from the Applied Studies Program.   
  
  
I understand that any positions initiated by the University of Lethbridge Applied Studies Program will be registered as an Applied Studies course.   
  
  
I give permission for the University of Lethbridge Applied Studies office to give/receive information regarding grades, transcripts, and evaluations to/from the Work Supervisor and the Academic Supervisor.   
  
  
I understand that the Applied Studies office will retain a copy of my academic transcript for my Applied Studies file. By submitting this application, you authorize the verification of the information provided on this form and agree to the terms set out in this form.  
  
  
Upon approval by all listed parties on my completed Applied Studies Applications, I agree to be registered in the course listed.  
  
Protection of Privacy – If the information contained in the above authorization is personal information governed by the Alberta Freedom of Information and Protection of Privacy Act, such personal information on this form is collected under the authorization of Section 33(c) of that Act and is protected under Part 2 of that Act.   
  
  
Such personal information will be used for the purpose of application to Applied Studies courses at the University of Lethbridge and for the purpose of managing the consent for disclosure of personal information process.  Direct any questions about this collection to: Director, Governance (403) 329-2201.   
  
  
This form will be retained and disposed of in accordance with the approved records retention and disposal schedules of the University of Lethbridge.

* I consent