Course Summary & Contract Plan

Deadline: This form is due 30 days prior to the quarter in which the work is to be completed. The Course Summary & Contract Plan form must be returned to the Social Work Program office.

Student Name ___________________ Faculty Sponsor ___________________ Qtr/Yr ______

UW Email Address: ____________________________

Course #/Title  _TSOCW 590 Independent Research in Social Work

# of Credits __3__ (decimal graded only)

Selective Substitution Consideration:  Yes ☐  No ☐

*Note: Tuition assistance for MSW CWTAP students cover required MSW courses only. Independent study credits may not be eligible for tuition assistance. Please contact the CWTAP Director for more information.

Nature of Research Study, e.g., project title and primary objective:

Learning Goals: (Goals should in general link to Competency #6: Engage in research-informed practice and practice-informed research)

Learning Goal #1 (include training activities to be undertaken and format for evaluation)

Learning Goal #2 (include training activities to be undertaken and format for evaluation)

Learning Goal #3 (include training activities to be undertaken and format for evaluation)
Additional (include training activities to be undertaken and format for evaluation)

Instructional Meeting Schedule:

Brief Description of Significant Scholarly Product (attach documents as necessary):

Plan Approved: Faculty Sponsor / Date

Student Signature / Date

Evaluation Comments:

Social Work Degree Committee Approval as AIP Selective Substitution: ☐ Yes ☐ No