



STARR KING INDIVIDUALIZED LEARNING (SKIL) Form

ACTION ITEMS:

1. Complete and sign the form.
2. Please save the completed form as a PDF with the file name: YearTerm.SKIL.First name Last name (ex: 2021SP.SKIL.Stu Learner)
3. Email the form to: Registrar@sksm.edu and cc: supporting faculty and advisor.
The registrar will obtain necessary signatures.

Student Name: _____

Student Legal Name (if different): _____

Degree Program: MDIV MASC MDIV/MASC

Individual SKIL Group SKIL

Proposed Title: _____

Faculty Member Guiding SKIL: _____

Term: Fall Intersession Spring Summer

Year: _____

Grade: Pass/Fail Letter Grade

Units:

1 unit (45 hours of work expected)

1.5 units (67.5 hours of work expected)

2 units (90 hours of work expected)

3 units (135 hours of work expected)

of units: _____

Primary Threshold(s) Involved in Individualized Learning Course
(check one, two max):

1: Religious Community & Interfaith Engagement

#2: Prophetic Witness & Work

#3: Sacred Text & Interpretation

#4: History of Dissenting Traditions & the Thea/ological Quest

#5: Spiritual Practice & the Care of the Soul

#6: Thea/ology in Culture & Context

#7: Educating for Wholeness & Liberation

#8: Embodied Wisdom & Beauty

Student's Signature: _____

Date: _____

Signatures

Supporting Faculty Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Registrar Signature: _____

Date: _____



PRELIMINARY INDIVIDUALIZED LEARNING SYLLABUS

Instructions: Please create a preliminary syllabus (no more than 1-5 pages) for your proposed Starr King Individualized Learning (SKIL) course. The items to be included are listed below. Your preliminary syllabus must be reviewed and approved by your faculty sponsor **before** registration begins. A final syllabus will be created with your faculty sponsor within 2 weeks of the start of the term and revised as agreed to by student and faculty sponsor.

Student's Name: _____ **Date:** _____

Term/Year: _____

(1) Course Title (30 characters or less, including spaces and punctuation):

(2) Course Description (how you envision conducting your SKIL):

(3) Course Purpose (your reason for undertaking this SKIL):

(4) Faculty Interaction (how often you will meet with your faculty sponsor):

(5) Learning Outcomes (1-3 measurable goals you will accomplish by end of this course):

(6) Method of Evaluation (based on work produced such as academic papers, presentations, sermons, creative projects, counter-oppressive activism, reflection papers, etc.)

(7) Texts & Other Sources (your primary texts and sources for this course):

(8) Course Outline & Calendar (by month or week, including theme, texts, and activities):

(9) Previous Individualized Learning courses (including past SRCs – Special Reading Courses) you have completed at SKSM (term/year, title, number of units, individual or group, faculty sponsor):