DIRECTED STUDY PROPOSAL
Directed Study 0197
Directed Study 1497

Student Name: ________________________________

Fall: _________

ID: ________________________________

Spring: _________

Major: ________________________________

Summer: _________

dates (if summer): ______________

Number of credits: __________

Project title: ________________________________

Check One: Directed Study 0197 _______ Directed Study 1497 _______

Course name and number being fulfilled (e.g., Psy 0101, Intro to Psychology): ________________________________

Credits apply to (Check One): Major _______ Minor_______ Concentration _______ Elective ______

Student Responsibilities: ____________________________________________________________

__________________________________________________________

Faculty Instructor’s Responsibilities: ______________________________________________________

__________________________________________________________

Basis of Grading: ________________________________________________________________

__________________________________________________________

1. ___________________________________ 4. ______________________________
   Student Date Program Director Date

2. _________________________________ 5. ______________________________
   Faculty Instructor Date Division Chair Date

3. _________________________________ 6. ______________________________
   Academic Advisor Date Vice President and Dean of Academic Affairs(Dr. Hardin) Date

The student is responsible for obtaining signatures and delivering this form to the Registrar’s Office at the time of registration. The student is also responsible for all charges associated with registering for this course.