Petition and Authorization for Directed Study

Undergraduate

This form must be completed in triplicate and approved by the faculty member directing the study. The student then takes all three (3) copies for approval to the Office of Student Affairs for approval by the Associate Dean for Academic Affairs. After approval a copy will be given to the student, the faculty member involved and one placed in the student’s record.

STUDENT’S PETITION TO FACULTY

Date:____________________

Student’s Name: ________________________________________________________________
(Print or Type)

Request permission to register in: __________________________________________________
(course, dept., and number)

For _____ hours of credit to be earned through directed study for the semester ending__________
(month, year)

The study is to be completed by _________________________________.
(date)

DESCRIPTION OF STUDY: Discuss with faculty before defining nature, scope, and significance of the study.

FACULTY APPROVAL:

I approve the above directed study and can give the necessary time to direct the work.

Date:____________________ Faculty Signature:________________________________________

ASSOCIATE DEAN’S APPROVAL:

Date:____________________ Associate Dean’s Signature________________________________

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