

APPROVAL FORM for DIRECTED INDIVIDUAL STUDIES/SPECIAL TOPICS

1. Student Name _____ Classification _____

Process:

- a) Student MUST fill out and submit form to Faculty Member
- d) Student MUST register for the course in Banner through the ADD a course process.

2. Course to be undertaken during (check one) | Spring 20__ | Summer I 20__ | Summer II 20__

3. Course Professor: _____

4. Course Title: _____ Credits: _____

a) Description of Content:

b) Objectives:

c) Requirements for Successful Completion:

5. Instructor/Student Meeting Time(s): _____

This course will ONLY count as an elective.

7. Signatures/Approval:

Instructor _____ Date _____

S/ARC Director _____ Date _____ Recommended _____
Not Recommended _____