# GRADUATE DIRECTED INDIVIDUAL STUDY REQUEST FORM

NAME:

LETTER GRADE:

S/U CREDIT:

TERM:

COURSE PREFIX & NUMBER:

HOURS:

COURSE TITLE: REF #

# APPROVED:

**INSTRUCTOR ADVISOR**

REASON REQUESTING COURSE:

DETAILED DESCRIPTION OF THE WORK TO BE DONE:

DESCRIPTION OF THE PROPOSED MEETINGS TO BE HELD BETWEEN FACULTY AND STUDENT, INCL. NUMBER AND LENGTH:

DESCRIPTION OF THE PRODUCT OF THE COURSE AND HOW STUDENT PERFORMANCE IS TO BE MEASURED:

**RETURN FORM TO RBB 243 FOR FINAL APPROVAL.**