



Directed Research Registration

Investigative learning involving closely directed research and the use of such facilities as the library or laboratory.

Directed Research requires the approvals of the academic advisor, instructor, and course department chair before submitting the registration form to the Office of the Registrar.

Please clearly print all information.

Student Name _____ Student ID# _____

Major(s): _____ Minor(s): _____

I have read the above information and fully understand the directed research policy.

Student Signature _____ **Date** _____

Course Enrollment Term

Fall _____ Interterm _____ Spring _____ Summer _____

Course #	Credit Hours	Course Title	CRN
_____ 450			

Course Description

Approval Signatures → Obtain signatures of the advisor, instructor, and department chair before submitting registration form to the Office of the Registrar.

Academic Advisor _____ **Date** _____
signature print name

Instructor _____ **Date** _____
signature print name

Department Chair _____ **Date** _____
signature print name

For Office Use Only

School Dean _____ **Date** _____

Registrar _____ **Date** _____

Approved Denied **Comments:** _____

Course Details Description SFAREGS