

# SAINT MARTIN'S UNIVERSITY

## Directed Study Request

- A Directed study is designed for the student who wishes to research and study a topic not covered in course offerings or who wishes to explore a topic in greater depth.
- The study is initiated by the student. The faculty member's role is to aid the student in defining the topic, suggesting resource material and evaluating the student's achievement. Regular meetings are to be scheduled with the faculty supervisor at the outset of the study.
- Respective academic departments define how many hours of a directed study may be counted in the major and will approve the topic and the content. .
- Directed studies are recommended for regular catalog courses only under special circumstances and will not normally be accepted to satisfy any general education requirement.
- A Directed study may carry a letter grade or be taken pass/fail; determination must be made upon signing of request.
- A Directed study is open to a student after successful completion of the freshman year.
- In the case of transfer students, after the successful completion of at least one semester at Saint Martin's University.
- A student must have a cumulative grade point average of 2.0.
- A student may enroll in no more that one directed study in any one semester.
- An unofficial copy of the student's transcript must accompany the request.

.....  
Student Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Class: \_\_\_\_\_ Major: \_\_\_\_\_ Advisor: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_  
.....

DEPT	NUMBER	COURSE TITLE	CREDITS	INSTRUCTOR
_____	_____	_____	_____	_____

SEMESTER TO BE TAKEN: \_\_\_\_\_ GRADE OPTION:  Letter grade  Pass/Fail

SIGNATURES: (must be obtained in order)

1. ADVISOR: \_\_\_\_\_  Approved  Denied  
Date

2. INSTRUCTOR: \_\_\_\_\_  Approved  Denied  
Date

A copy of an OUTLINE FOR PROPOSED DIRECTED STUDY must be filled out and attached before obtaining the remaining signatures and registering for the study.

3. DEAN OF DIVISION (of course in question): \_\_\_\_\_ Date  
 Approved  Denied

4. VICE PRESIDENT FOR ACADEMIC AFFAIRS: \_\_\_\_\_ Date  
 Approved  Denied

I agree to the terms of this directed study and understand that this course must be completed with in the semester for which I have registered.

STUDENT SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

**SAINT MARTIN'S UNIVERSITY**

Outline for a proposed Directed Study

STUDENT NAME: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_  
Day: \_\_\_\_\_  
Evening: \_\_\_\_\_

DEPT	NUMBER	COURSE TITLE	CREDITS	INSTRUCTOR
_____	_____	_____	_____	_____

SEMESTER: \_\_\_\_\_ YEAR: \_\_\_\_\_ GRADE OPTION: Letter: \_\_\_\_\_ Pass/Fail: \_\_\_\_\_

.....

I. GOALS/OBJECTIVES:

II. FORMAT/LEARNING EXPERIENCE/ACTIVITIES:

III. EVALUATION - COMPETENCY DEMONSTRATION