

STUDENT REQUEST FORM TO TAKE A DIRECTED READINGS COURSE

Please provide the following information about the course to be offered and the students who intend to take this course.

1. Instructor's name: _____ Sem. to be offered: _____

2. Course title: _____

3. If it is intended to replace an existing course, provide the following information:

a. the equivalent course _____

b. why can't the student(s) take it as a regular course? _____

4. If it does not replace an existing course, then:

a. state the objectives of offering the course _____

b. attach the following Information: detailed syllabus of the course, text book and references and the manner in which the course will be conducted, i.e., class meetings, assignments, exams, grading, etc.

5. Student information:

Students' names	sem. hours in 5xx courses completed	GPA	student signatures
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Instructor's signature _____ Date: _____

All requests must be submitted to the Director, MS-CES Program

Action of the Director, MS-CES Program: Approved / Disapproved (reasons for disapproval)

Director's signature _____ Date: _____