

APPLICATION FOR DIRECTED STUDY

Framingham State University - Office of the University Registrar

Students who wish to take a regular university course in a term when it is not offered may seek to do so through a Directed Study option. However, students must understand that, because the appropriate Framingham State University (FSU) faculty must be available and approvals must be granted, the option of Directed Study for a particular course is not always available. In Directed Study, the FSU faculty member must agree to provide the student with close supervision, in achieving the same course objectives that would have been accomplished had the student taken the course on a regular class basis. Permission for Directed Study must be obtained from the subject/course faculty supervisor and the course department chair. Directed Study courses will appear on the student's course history with the actual course prefix, number, and title as found in the Catalog.

This application is for matriculated degree-seeking undergraduate (Bachelor's) students attending the University. This completed form, including all of the required signatures and the course syllabus, must be submitted in its entirety prior to the end of the Course Add/Drop period of the semester to the Office of the University Registrar (McCarthy Campus Center, CC515).

If this directed study is intended to be taken as a 5th course during the fall or spring semesters, please submit the 5th course request with this completed form.

Please Print Information

Name (Last/First/Middle):

FSU Student ID:

FSU Student Email:

Cell Phone #:

Major 1:

Major 2:

Minor 1:

Minor 2:

Anticipated Semester/Year of Graduation:

Check Appropriate Box:

Day School Undergraduate

DGCE Undergraduate

Directed Study Course Information:

Catalog Course Subject Prefix & Number:

Semester to be taken:

Catalog Course Title:

A copy of the course syllabus from the faculty instructor must be accompany this completed form.

Signature of Student

Date

Signature of Student's Major Advisor

Date

Signature of FSU Faculty Supervisor

Date

(as approved by Department Chair in which Directed Study is taking place)

Please Print FSU Faculty Supervisor's Name

Signature of Department Chair

Date

(of Department in which Directed Study is taking place)

Please Print Chair's Name

Office of the University Registrar use only: