DIRECTED STUDY
REGISTRATION FORM

Steps:

☐ I. SOE faculty and student complete part I
☐ II. Submit to Dean’s Office for Approval and processing of form
☐ III. Pick up completed form from Dean’s Office and either bring completed form to One Stop Enrollment and Financial Services Office, LM 251 or register online with CRN # provided in part II

PART I: TO BE COMPLETED BY THE STUDENT & SOE FACULTY

Last Name, First, MI

Email Address

USF Student ID Number

Year/Term

I = Intersession; S = Spring; M = Summer; F = Fall (i.e., 12F = Fall 2012)

Course Title (in full)

Instructor’s Name

Course Title (abbreviated, 24 characters, including blank spaces, as you wish it to appear on your transcript)

Credits

(1-3)

1 credit = 45 hrs course activity
2 credits = 90 hrs course activity
3 credits = 135 hrs course activity

Course Description:

Course Plan (Textbooks/Reading/Assignments/Meetings):

This form is two sided and the sections on the back must be completed for the form to be processed
Student Learning Objectives:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Outcome/Products of the Directed Study:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Measurement of Outcomes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Faculty Signature  Date

Advisor Signature  Date

Student Signature  Date

Previous Directed Study credits: _____________

PART II: TO BE COMPLETED BY THE DEAN’S OFFICE

Dean’s Signature  Date

Course Number

Faculty Last Name

CRN Number  Credits

Dean’s Office Representative  Date