

# **Request for Registration in Independent/Directed Study Course**

## **COLLEGE OF ARTS & SCIENCE**

Student Name: \_\_\_\_\_

Semester: \_\_\_\_\_

Commodore ID: \_\_\_\_\_

Class: JR \_\_\_\_\_ SR \_\_\_\_\_ other\*\* \_\_\_\_\_  
(see bottom of page)

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_@vanderbilt.edu

Course Dept., Course Number: **PSCI** \_\_\_\_\_

Credit Hours: \_\_\_\_\_

Instructor:

### **INSTRUCTIONS FOR REGISTERING:**

1. Obtain permission to enroll in an independent study course from the instructor of your choice.
2. Work with the administrative assistant in the department in which you are doing the independent study to be registered in the course **before the end of the Change Period**.
3. Use this form to make a written study plan detailing the nature of the project and the amount of credit and have it approved by the instructor and the department chair. Submit the form to the department by the 10<sup>th</sup> day of classes.

**\*\*You must be registered for the course prior to the end of the Change Period.\*\***

Please describe the nature of your project: (Be as specific as possible, including required readings, assignments, and the method of evaluation)

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Specify the arrangements and frequency of meetings with the instructor:

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Student's Signature

(Date)

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Instructor's Signature

(Date)

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Department Chair or DUS Signature

(Date)

**\*\*If student is NOT a junior or senior, please list reason for exception:**

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