

**DIRECTED READINGS, INDEPENDENT STUDY, INTERNSHIP, VARIABLE CREDIT
APPROVAL FORM**

Student must complete two (2) copies of this form. Submit both copies to the supervising instructor and appropriate departmental chairperson for approval. One copy with approval signatures is submitted to the Registrar's Office when registering for the course, the other copy is maintained in the departmental office.

Student Name _____

Student Social Security Number _____

COURSE INFORMATION

Quarter/Year of course: Fall 20____ Winter 20____ Spring 20____ Summer 20____

Department
three letter
abbreviation

Course Number

Credit
Hours

For Office use only: _____

Print course title as it should print on your transcript (must be 24 spaces or less)

Description of course content (must be completed by students receiving veterans' benefits):

Name of supervising instructor _____
(please print)

Signature of supervising instructor _____
(Date)

Signature of Department Chair _____
(Date)

For instructor/dept. chair only:

student will receive: _____ a standard letter grade of A-F
_____ an S/U grade (course must be on approved list of
courses for S/U grading)