



**Directed Readings, Independent Study, Internship, Variable Credit  
Approval Form**

**Instructions:** Students must complete 2 copies of this form. Submit both copies to the supervising instructor and appropriate Department Chair for approval. One copy with signatures is submitted to the Registrar’s Office when registering for the course. The other copy is maintained in the department.

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

Please select type: <input type="checkbox"/> Directed Readings <input type="checkbox"/> Independent Study <input type="checkbox"/> Internship <input type="checkbox"/> Variable Credit <input type="checkbox"/> Other (please specify) _____	Course Information (Term): <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Spring  Year _____	Course Information (Credit):  _____ DEPT Abbreviation _____ Course Number _____ Credit Hours  _____ Section (For Office Use Only)
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PRINT course title as it should appear on your transcript: \_\_\_\_\_

Note: Students receiving Veteran’s Benefits must attach a course description of the course content.

**For Instructor/Department 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)

<b>Supervising Instructor</b>  Printed Name: _____  ID: _____  Signature: _____	<b>Department Chair</b>  Printed Name: _____  Signature: _____
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The signature of the Dean/Designee is required for the Richards College of Business and School of Nursing.

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Signature of Dean/Designee (RCOB and SON only)