



## Request to Offer a Directed Independent Study Course

### MEMORANDUM

**TO:** \_\_\_\_\_  
Dean

**FROM:** \_\_\_\_\_  
Instructor of the course

**DATE:** \_\_\_\_\_

I request permission to offer \_\_\_\_\_ on a DIS basis for  
Course

\_\_\_\_\_ in \_\_\_\_\_  
Student SGSC ID # Semester/Year

\_\_\_\_\_  
Signature of Faculty Member

\_\_\_\_\_  
Signature of Student Requesting DIS

Justification for Request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A copy of the syllabus for the Directed Independent Study must be attached.**

### **Approvals:**

Dean \_\_\_\_\_ Date \_\_\_\_\_

VP for Academic and Student Affairs \_\_\_\_\_ Date \_\_\_\_\_

The completed form is to be forwarded to the Vice President for Academic & Student Affairs for approval before course record number can be assigned.