



East Georgia State College
 Office of Student Affairs
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 Swainsboro, GA 30401
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Directed Study Course Request

Term: _____ Spring _____ Summer _____ Fall Year: _____

Part of Term: Full Term Session / Session I / Session II

Student Information:

_____	_____	_____	_____
Last Name	First Name	M.I.	Student ID#
_____		_____	
Address		Apt #	
_____	_____	_____	_____
City	State	Zip Code	Phone Number

To be completed by Faculty agreeing to Directed Study:

Course prefix: _____ Number: _____ Credit Hours: _____

Course Name: _____

Day(s) and time(s) student will meet with faculty: _____

Location(s) and Room Number(s): _____

****A syllabus must be provided with this document before the course will be created and added to the student's schedule.**

By signing this form, I agree to the policies regarding Directed Study (found on page 2) and I have consulted with the Student's Advisor. Additionally, I understand that I agree to teach the course without compensation.

Instructor's Signature: _____ Date: _____

General Policies on Directed Study Courses:

- 1. Academic quality should not be sacrificed in directed study courses. Students are expected to perform at equivalent levels to those in regular courses. Modifications in course requirements should be minor and only reflect procedural matters rather than course content.
- 2. The primary responsibility for completing a directed study course rests on the student. It is his/her responsibility to make sure that assignments are completed and tests are taken in a timely fashion.
- 3. As a partner in a directed study course, the instructor agrees to set aside at least one hour per week (more if the class has a lab) to meet with the student. These hours and days (from beginning to end) shall be stated in writing. Instructional hours should not overlap with office hours.

By signing this form, the student agrees to the policies regarding a Directed Study course.

Student Signature: _____ **Date:** _____

Reason for Directed Study:

Approval Section:

Student's Academic Advisor	Date
Dean / Department Chair	Date
Vice President for Academic Affairs	Date
Registrar	Date