Department of Earth Sciences
AUTHORIZATION TO TAKE DIRECTED STUDIES COURSE
GEO 494, GY 494, MET 494

Reminder: no more than 8 total hours of independent study (494/496) can count towards your degree.

Student Name___________________________________ Student J# ________________
Student Email Address:_______________________________   Phone________________

Hours Credit_________        Course No.______________     Semester________________

Objectives of Directed Study:

Reports to be submitted:

I request permission to take the Directed Study specified above. I understand that it is my responsibility to consult promptly and frequently with my faculty director to ensure that all necessary work is completed on time.

Date: ____________ Student signature_________________________________

I agree to direct the student's work as specified above, to evaluate the reports submitted, and to assign an appropriate grade at the conclusion of the course.

Date: ____________ USA Faculty signature_____________________________

APPROVED ___________________________________ Date: ___________

Department Chair