

REQUEST FOR COURSE TITLE

[DIRECTED STUDY, DIRECTED READINGS, OR INDEPENDENT STUDY]

Instructions and Procedures:

Students complete this form to request that an annotated title appear on the transcript for a directed study course.

The form must be filled out, approved by the instructor and graduate program director, and submitted to the Graduate School for final approval.

Students are to then follow the normal procedure to register for the course using LOCUS. **Note if you do not enroll in this course, your request will not be processed.**

Student Information:			
Name:Last	First	Midd	
LUC ID#:			
Email:	@luc.edu	Phone: _()	
Course Information: Note: If you do not provide this in	nformation or it is incorrect, y	our request will not be processe	ed.
Course Prefix: Cour	se Number: Se	ection: Call Nu	mber:
Semester and Year:	Instructor:		
Course Title:			
(Limit 60 charac	cters, including spaces)		
This form must be signed by be	oth the course instructor ar	d your GPD before it is proc	essed.
Instructor Approval:			
Printed Na	ame	Signature	Date
Graduate Program Director Appro	oval:		
	Printed Name	Signature	Date
Return to the Graduate School,	Granada Center 400, LSC		
Graduate School Approval:			
Signature			Date