

Directed Study Contract Form

The University of New England | Office of the Registrar 11 Hills Beach Road (Decary Hall, 114) Biddeford, ME 04005 Phone: (207) 602-2473 | Fax: (207) 602-5927 | Registrar@une.edu

POLICIES

A Directed Study is the offering of a catalog course on an individual basis by an appropriate faculty member to a qualified student. Directed Studies are available only on a limited basis and require permission (see below).

It is the responsibility of the student to obtain all applicable signatures and turn the form in to their Academic Dean's office for review and approval. If approved, the Academic Dean will forward the paperwork to the Registrar's Office for processing.

STUDENT	INFORMATION			
_ast Name: _		First Name:	PRN: _	
Email Address:		Major:		
SECTION	I: QUALIFICATIONS			
To qualif	fy for a Directed Study, the student m	ust meet all of the following conditions:		
	The student is a degree candidate at the	ne University of New England.		
☐ The course is required for the student's degree/minor completion.				
	The course is an upper level course (3	00 level or higher).		
	The course will not be offered as a part of the regular curriculum in time to prevent postponement of the student's degree, or there is a time conflict between two courses specifically required for the degree, neither of which may be postponed without resultant delay in the completion of degree requirements.			
	The student/instructor has attached a detailed, approved proposal for the Directed Study. (Attach a course syllabus that includes learning outcomes, methods of evaluation, meeting days and times, and a plan of study.)			
		proposal must be received by the Registrar's to be done. <i>Note that college/program dea</i>		
SECTION	II: COURSE INFORMATION			
Course Subje	ect (ex. BIO):	Course Number (ex. 410):		
ourse Title:	:	Campus: Biddeford	Portland	Credits:
Grading: Pa	ss/Fail Letter Grade	Semester (Fall, Spring, Summer):	Year:	
aculty/Instructor Information - Last Name:		First Name:	PRN	:
SECTION	I III: APPROVAL (Font signature NOT a	accepted)		
tudent's Signature:		Today's Date:	Today's Date:	
faculty/Instructor Sponsor's Signature:(Indicates willingness to teach the proposed Directed Study of		Study Course)	Today's Date:	
cademic/Program Director's Signature: (Approves instructor and authorizes the Registrar's Office t		fice to create the proposed Directed Study Course\	Today's Date:	
	Dean's Signature		Today's Date:	