

**Section A: Student Information**

Name \_\_\_\_\_ USF ID \_\_\_\_\_  
 Major \_\_\_\_\_ Current phone \_\_\_\_\_  
 USF Email Address \_\_\_\_\_

**Section B: Course Information**

*This section will be filled out by the department, **except for the term**, & your advisor will register you. Please disregard the dates and times listed in Oasis, and follow what you and your instructor or site coordinator have arranged.*

Fall 20 \_\_\_\_\_  
 Spring 20 \_\_\_\_\_ Course Title \_\_\_\_\_ Reference no. \_\_\_\_\_  
 Summer A 20 \_\_\_\_\_  
 Summer B 20 \_\_\_\_\_ Prefix \_\_\_\_\_ Number \_\_\_\_\_ Section \_\_\_\_\_  
 Summer C 20 \_\_\_\_\_

Credit Hours \_\_\_\_\_ *\*Each Credit is equal to 30 hours of work. If you need 3 credits, you'd complete 90 hours of work in the semester.*

**To be completed by student.**

Describe proposed study or internship. Please include contact information site coordinator, if this is an internship, & attach confirmation.

State briefly your reason(s) for taking the directed/extend study.

Terms of Agreement (What will be the end result? A term paper, special project, field trip, video, etc.)

Terms of Evaluation: Describe criteria to be used in making evaluation **(to be filled out by instructor)**

I HEREBY AGREE TO THE TERMS OUTLINED ABOVE FOR COMPLETING THIS COURSE OF DIRECTED STUDY.

\_\_\_\_\_  
Name of Instructor Date

\_\_\_\_\_  
Signature of Instructor Date

\_\_\_\_\_  
Signature of Student Date

\_\_\_\_\_  
Signature of School Director Date

