Request Form – Honors Research and Directed or Independent Study  
(Undergraduate Program)

Honors Research, and Directed or Independent Study courses MUST be approved by the Division/School Chair (and the Honors Director when applicable).

Instructions:

◆ The Supervising Instructor completes the request form and forwards it on to the Division/School Chair, (and the Honors Director when applicable), for approval.

◆ Approved Requests: Division/School Chair signs the form and sends it to the Registrar for approval. A copy should also be sent to the Supervising Instructor, and Honors Director (when applicable).

◆ Not Approved Requests: Division/School Chair signs the form and sends it back to the Supervising Instructor.

**IMPORTANT:** If students change their plans AFTER the Supervising Instructor has received Division/School Chair approval, the Supervising Instructor MUST notify the student that they need to go to the Registrar’s Office and officially drop the course. The CUT-OFF each semester for making changes is the ADD/DROP DEADLINE which is set by the Registrar’s Office.

<table>
<thead>
<tr>
<th>Request for: Honors Research Registration ☐</th>
<th>Directed Study ☐</th>
<th>Independent Study ☐</th>
</tr>
</thead>
</table>

(Please Print)

Supervising Instructor: ____________________________  Campus Box #: ________

Division/School: _________________________________  Semester: ___________  Year: 20_____  

 Course Code: ___________________________  Semester Hour Credit: ___________  

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Number</th>
<th>Section</th>
<th>(as listed in College Catalog)</th>
</tr>
</thead>
</table>

Student’s Name(s): 

1. ___________________________  I.D.# ___________  

If auditing course, be sure to identify that next to name.

2. ___________________________  I.D.# ___________  

3. ___________________________  I.D.# ___________  

4. ___________________________  I.D.# ___________  

Rationale for Request: ______________________________________________________  

______________________________________________________________________________  

______________________________________________________________________________

________________________________________  Date  

Supervising Instructor/Signature

________________________________________  Date  

Chair/Signature  

Approved ☐  

Not Approved ☐  

________________________________________  Date  

Honors Director/Signature (when applicable)  

Approved ☐  

Not Approved ☐  

__________________________  Date  

Original Form:  

Registrar ☐  

Copies:  

Honors Director (when applicable) ☐  

Supervising Instructor ☐

Updated: 08/08/17