

GRADUATE STUDIES

DIRECTED STUDIES / SELECTED READINGS - Course Request

PART A: To be comp	oleted by Student		
Date:			
Student Name:		Student Numl	per:
Student Email:		Supervising Pr	ofessor:
Full Course Name:			
Short Title:			
Course Number:	characters including spaces for transcript) Session (ie. W2020	020)	Term (1, 2, both):
PART B: To be comp	pleted by the Professor in c	onsultation with	the student
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Course methodology (ch Research (generation	·		Please attach a Course Outlin
Readings (in-depth li Other (please specify	, , , , , , , , , , , , , , , , , , ,		
Other (picase speeling	,		
Start Date:			Credits:
Start Date: Student Evaluation:	End Date:		Credits:
Student Evaluation: Provide a detailed descript of the final grade:	End Date:		
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional here.	End Date: ption of how the student will be evaluated by the stude	fessor contact):	
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional here. Number of independent st	End Date: ption of how the student will be evaluated by the stude	fessor contact):	
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional how the state of the state o	End Date: ption of how the student will be evaluated by the stude	fessor contact):	
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional he Number of independent st Additional Comments (if r	End Date: ption of how the student will be evaluated by the stude	fessor contact):	
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional he Number of independent st Additional Comments (if reference) PART C: Approval & Student:	End Date: ption of how the student will be evaluated by the stude	fessor contact):	course component as a percentage
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional he Number of independent st Additional Comments (if r	End Date: ption of how the student will be evaluated by the stude	fessor contact):	Date:
Student Evaluation: Provide a detailed descript of the final grade: Number of instructional he Number of independent st Additional Comments (if recommendation of the final grade) PART C: Approval & Student:	End Date: ption of how the student will be evaluated by the stude	fessor contact): endent student work):	Date:

Personal Information ("Information") provided on this form is collected pursuant to section 26 of the *Freedom of Information & Protection of Privacy Act (the "Act"*), R.S.B.C. 1996, c.165 for the purpose of processing your directed studies requirements. The Information will be used and shared within UBC in accordance with the Act. Any questions regarding the collection of the Information may be directed to the appropriate faculty as listed on the front page.