

REGISTRATION FORM FOR

DIRECTED STUDIES or SENIOR PROJECT

**For Office Use Only**

**Rec’d: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Course:**

**Section:**

**Instructor:**

Student Name

Student Number

Student Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree Program

Application Date

**NOTE:**

* **Registration processing time; 3 to 5 business days.**
* **Students will be emailed to pick up their signed registration form in B356/R310.**
* **Students must register in B200 by the end of the second week of classes.**
* **Students planning to graduate must have their course work completed and grades submitted by the deadline noted in the calendar.**

# COURSE DETAILS: Class maximum 5 students per section \_\_\_\_

# Course Name and Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course Credits \_\_\_\_\_\_

Course Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course End Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Campus (if not Nanaimo) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Supervising Instructor

**Check one of the following:**

Fall Semester \_\_\_\_\_\_ Spring Semester \_\_\_\_\_\_ Intersession \_\_\_\_\_\_ Year-Long \_\_\_\_\_

**Curriculum Plan – Please provide students with the following:** course outline, student assignments, required readings, student/faculty meetings or feedback mechanisms, and methods of student evaluation at mid-term and end-of-term.

**SIGNED APPROVALS:**

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervising Instructor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Divisional Dean \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_