



1701 North State Street, Campus Box 150436
Jackson, MS 39210-0001
Web: www.millsaps.edu/records
Email: records@millsaps.edu
Office: Academic Complex, Room 142
Phone: 601-974-1120

Directed Study Application

Please complete the following. This information will be maintained in your permanent record file.
One copy of this form MUST be filed with the Records Office by last date to add classes (published for each semester).

Student full name _____

Student ID _____ Faculty Directing _____

Course code (4 letters) _____ Directed Course # (1800 – 4803) _____

Amount of Credit Hours: _____

Year: _____ Fall: _____ Spring: _____ Summer 1: _____ Sum 2: _____ Sum Long: _____

Specific Objectives:

Learning Resources:

Learning Activities:

Method(s) of Evaluation: _____

Method of Grading: _____ Credit/No Credit _____ Letter Grade

SIGNATURES:

Student _____ Date _____

Millsaps Faculty Instructor _____ Date _____

Millsaps Department Chair _____ Date _____

RO Staff _____ Date _____