

**LIS 598 DIRECTED STUDY**  
**(Prerequisite: Permission of Instructor)**

<b>STUDENT NAME:</b>	<b>Person No.:</b>
<b>E-MAIL:</b>	
<b>REGISTRATION No:</b> _____ <i>(LIS office will provide)</i> <b>Credit hours:</b> _____ <b>GRADE:</b> Letter    S/U Fall _____    Spring _____    Summer Session _____    I    III	
<b>ENDING DATE OF DIRECTED STUDY:</b> ___ / ___ / _____	
<p><b>Any combination of LIS 526/527/598/599 may not exceed 9 credit hours.</b> Return the completed form to the LIS office (534 Baldy). You will be force registered into the course. <b>Observe drop/add dates for the semester you are registering for.</b></p>	
<b>DESCRIPTION OF DIRECTED STUDY:</b>	
<b>Faculty Name:</b>	<b>Faculty Signature:</b>
<b>Student Signature:</b>	