**DIRECTED STUDY FORM**  
Summer 2022

**Student Information:**
Name: ___________________________  
Student #: __________________

Supervisor/Program Advisor: ____________________________

**Course Information**
- ☐ ECE directed study - SYSC 5906 CRN 20718
- ☐ BME directed study - BIOM 5906 CRN TBD

Proposed Topic & Course code: __________________________________________

Directed Study instructor: ____________________________________________

**Checklist of Required Steps:**
1) **Detailed Course Outline attached**  
2) Directed study Instructor’s signature  
3) Supervisor/Program advisor’s signature (cannot be the same as directed study instructor)  
4) Graduate Faculty Associate Chair’s signature  
5) **Registration override submitted through Carleton Central**

Student’s signature: ___________________________  Date: _____________

Supervisor/Program Advisor: ___________________________  Date: _____________

Directed Study Instructor: ___________________________  Date: _____________

SCE-GFAC: ___________________________  Date: _____________