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(ARC 4000/7000)

SCHOOL OF ARCHITECTURE

APPROVAL FORM for DIRECTED INDIVIDUAL STUDIES/SPECIAL TOPICS

TO BE SUBMITTED TO THE DIRECTOR'S OFFICE (FILLED OUT AND SIGNED BY STUDENT & FACULTY MEMBER) BY THE 3rd DAY OF CLASSES OF THE SEMESTER 1. Student Name Classification _____Cell #______MSU ID # (9xx)_____ Email **Process:** a) Student MUST fill out and submit form to Faculty for approval. b) Faculty MUST submit to the Director's Office for signature and approval. c) Faculty MUST notify student to ADD course before the University deadline d) Student MUST register for the course in Banner through the ADD a course process. 2. Course to be undertaken during (check one) Fall, 20_ | Spring 20 | Summer I 20 | Summer II 20 3. Course Professor: 4. Course Title: _____ Credits: _____ a) Description of Content: b) Objectives: c) Requirements for Successful Completion: 5. Instructor/Student Meeting Time(s): _____ 6. This course will ONLY count as an elective.

S|ARC Director______ Date______ Recommended___

Student_____

Instructor Date

7. Signatures/Approval:

Date _____