



AMERICAN UNIVERSITY OF IRAQ SULAIMANI

Directed Study Form

Student Name: _____ ID: _____

Major: _____

Minor, Concentration: _____

GPA: _____

Semester/ Term*: _____

Professor Name: _____

Department: _____

Course Code: _____ Course Title: _____

Course Credit: _____

Eligibility:

1. The student has a senior status (+90 earned credit).
2. The student has a cumulative GPA of at least 2.0.
3. The course should not be offered during the semester.

***The Semester that the direct study course is to be taken.**

Each Direct Study Course must be budgeted in advance by the department that offers the course.

Instructor Name & Signature: _____

Department Chair Name & Signature: _____

VPAA: _____

Budget officer _____

Registration and Records Director: _____

Processed by: _____

1. STUDENT SHOULD GET ALL PARTIES APPROVAL
2. TO BE ENTERED IN SONIS ON SAME DATE
3. TO BE PLACED IN PERMANENT STUDENT FILE