



# AMERICAN UNIVERSITY OF IRAQ SULAIMANI

## Directed Study Form

Student Name: \_\_\_\_\_ ID: \_\_\_\_\_

Major: \_\_\_\_\_

Minor, Concentration: \_\_\_\_\_

Semester/ Term: \_\_\_\_\_

Professor Name: \_\_\_\_\_

Department: \_\_\_\_\_

Course Code: \_\_\_\_\_ Course Title: \_\_\_\_\_

### Eligibility:

- **Student must be enrolled in his/her final semester, and required for graduation.**
- **Each Direct Study Course must be budgeted in advance by the department that offers the course.**

Instructor Name & Signature: \_\_\_\_\_

Department Chair Name & Signature: \_\_\_\_\_

Dean of Faculty: \_\_\_\_\_

Budget officer \_\_\_\_\_

Registration and Records Director: \_\_\_\_\_

1. MUST BE SUBMITTED BY THE DEPARTMENT CHAIR
2. TO BE ENTERED IN TOPSCHOOL ON SAME DATE
3. TO BE PLACED IN PERMANENT STUDENT FILE