

Directed Individual Study Form Request

Use this form to request enrollment into a Directed Individual Study (DIS) Course, MAT 6907, at Florida Gulf Coast University.

(Generic) Course Description

Individual study in mathematics by a graduate student under the direction of a faculty mentor. Topic(s) to be determined by mutual agreement. Instructor permission required.

Instructions

Fill out part I completely, and then have the instructor agreeing to direct the course fill out part II entirely. Once the instructor has completed part II, sign and obtain the instructor's signature in part III, and then submit the form to the Mathematics Graduate Program Coordinator. Incomplete forms will not be considered. You will be contacted by the Mathematics Graduate Program Coordinator once the form has been processed indicating whether the request has been approved or denied.

Part I: Student Information

UIN #: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Email Address: _____ Phone #: _____

Catalog Year: _____ Expected Term of Graduation (Semester and Year): _____

Reason for the request (please check one):

1. The request is for a course or topic of study that is **not regularly offered** in the MS Mathematics Program
(cf. <http://www.fgcu.edu/CAS/MathMS/requirements.asp>) _____
2. The request is for a course that **will not be offered** by the Mathematics Department before or during my expected term of graduation. _____
3. Other. Explain: _____

Part II: DIS Request Details

Proposed DIS Course Title: _____

Number of Credits (1-4): _____

Instructor's Name: _____

Semester and Year: _____

Tentative *Detailed* Course Description (attach any supporting documentation available, e.g. syllabus, etc.):

Part III: Approval Signatures

Student requesting the DIS course

Instructor agreeing to supervise the course with student

Mathematics Graduate Program Coordinator

Mathematics Department Chair

Comments:

Date Received: _____

Approved/Denied: _____