

Application and Guidelines for Undergraduate Students to Register for Directed Studies

University of Detroit Mercy-College of Liberal Arts & Education



Purpose:

A directed study (DS) is intended to provide a student the opportunity to conduct an in-depth examination of a topic that is not typically offered in a traditional course. A directed study is not intended to duplicate or act as a substitute for a required course. A DS course should demand a substantial project which is equivalent to an upper division (3000-4000 level course in the department). The details of the work must be specified in the DS contract.

Students must **APPLY** for a DS by speaking to a professor and completing the forms including writing a justification of their interest and preparation. The application must be approved by the Associate Dean in the College of Liberal Arts & Education. The dean's office will evaluate the application with no guarantee of approval.

Student Eligibility:

1. Student has taken all regular courses offered that cover relevant background material for the project/topic.
2. Student has a minimum of a B (3.0) GPA.
3. Student must be in the major or minor in the department hosting the DS.
4. Student has accumulated at least 60 credits toward degree.
5. Transfer students must have at least 30 credits at Detroit Mercy before eligible.
6. Guest students are not eligible.

Time Obligation:

1. Student should be prepared to spend a minimum of 30 hours for each credit hour registered.
2. A 3-credit hour course implies about 9 hours of work per week on the part of the student including time meeting with the instructor.
3. Student must meet with the instructor regularly with no less than one hour every other week.

Limitations:

1. May not be for Core Curriculum credit unless prior approval is obtained by Dean's office.
2. May not be for a course offered in the same semester as the DS is requested.
3. Must be approved before the end of add/drop week which is the first week of courses for a full-term course.
4. If approved, students may not register themselves for DS courses. All DS courses require student, instructor, chairperson, student advisor, and dean's office approvals.
5. Student may take a maximum of 6 credit hours of DS with any one faculty member during their degree program
6. Students are limited to 3 credit hours of DS instruction in any one semester (Honor's thesis/projects are exempted)
7. Students are limited to 6 credit hours toward a minor.
8. Students are limited to a total of 9 credits of directed studies counted toward graduation.

Circumstances where a DS course is not warranted:

1. Student doesn't meet the qualifications (above).
2. Student is unwilling to register for a regular course offering and therefore wishes to take the course under the guise of a DS course.
3. Student has not successfully completed all regular courses that cover the relevant background material.
4. The material in the DS course duplicates material covered in other CLAE courses.
5. Student chooses to lighten workload of a heavy course load.

Faculty Responsibilities:

1. Faculty are limited to 2 independent DS per semester (excluding course conversions).
2. Faculty are required to regularly meet students taking a DS, at least ½ hour a week.
3. For administratively converted DS sections, faculty are required to meet per the originally scheduled time/day.
4. DS may not be granted when the course is already being offered in the same semester.

Policy Exclusions:

1. Courses that were originally scheduled as traditional lecture courses but administratively converted to directed studies due to enrollment issues.
2. Research laboratories regularly offered as arranged by the department and dean's office.
3. In unusual situations (e.g., scheduling has not permitted a student to meet graduation requirements in a normal manner), the above circumstances may be waived by the Dean's office).



APPLICATION AND AGREEMENT FOR DIRECTED STUDY

College of Liberal Arts & Education

Student: _____ T0# _____

Course Number: _____ Number of Credit Hrs. _____ CRN Number (if existing): _____

Course Title: _____

Instructor: _____ Instructor T0# _____

Term 1____; Term 2____; Term 3____; Summer 1____; Summer 2____ Academic Year 20__ - 20 ____

(PLEASE CHECK ONE OF THE ABOVE, THIS INFORMATION IS MANDATORY)

Student Justification

Please write a short justification of your interest and preparation for a DS

DS Requirements and Due Dates

REQUIREMENTS**

DATE DUE

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

**In addition, as a necessary requirement of the directed study, there will be no less than ____ meetings to discuss the progress, focus and direction of the assignments to date, as well as any problems that may arise. Due to the nature of directed study, the above requirements will not be completed by the time mid-semester grades are due. Therefore, no mid-term grades will be submitted. I fully understand the requirements and expectations.

Student's Signature

Date: _____

Instructor's Signature

Date: _____

Department Chair's Signature

Date: _____

Associate Dean's Signature

Date: _____



University of Detroit Mercy

Advising and Registration/Change in Registration Form

UNIVERSITY OF
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PLEASE PRINT CLEARLY TO ENSURE ACCURATE PROCESSING

Student ID Number: T0 _____ Fall (10) Winter (20) Summer (30) 20_____

Name: _____
Last First Middle

Address: _____
Street City State Zip

Telephone: () _____ Work: () _____

Email Address: _____ Birthdate: ____/____/____

College/School:

- ___ Architecture
- ___ Business Administration
- ___ Dental Hygiene

- ___ Engineering & Science
- ___ Health Professions/Nursing
- ___ Liberal Arts & Education
- ___ University College

Undergraduate
Student Status:

- ___ New Freshman
- ___ New Transfer/Post Deg
- ___ Continuing Student
- ___ Unclassified/Other

Graduate:

Student Status:

- ___ New Graduate Student
- ___ Continuing Student
- ___ Unclassified/Other

Add/Drop A or D	CRN	Subject	Course Number	Section	Credit Hours	Days/Time	Required Signature(s)

Alternate Classes:

CRN	Subject	Course Number	Section	Credit Hours	Days/Time	Required Signature(s)

TOTAL CREDIT HOURS REGISTERED FOR THIS TERM: BEFORE THIS ACTION _____ AFTER THIS ACTION _____

Check here if this is a total withdrawal from class for this term Last Date of Attendance: _____
(Date Required for Total Withdrawal from All Classes)

Reason for withdrawal: _____

I understand that by signing this form that I, the student, am legally obligated to pay all tuition and fees. In the event of default, the University may refer my account to a credit reporting agency, a collection agency, and/or initiate legal action to recover any outstanding debt. I understand that I am also responsible for the costs of collection including interest, penalties, collection agency fees, court costs and attorney fees.

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Dean's Office Signature: _____ Date: _____

Office Use Only
