



Lander University Office of the Registrar

320 Stanley Avenue, Greenwood, SC 29649

Email Address: Registrar@lander.edu • Web Site: www.lander.edu/registrar

Phone: (864) 388-8948 • Fax: (864) 388-8028

This form must be submitted to the Registrar’s Office by the last day to register or add classes (fall or spring). Please TYPE or PRINT all information. **Incomplete forms will be returned to the student for completion before processing.**

To be completed by the student...

Student Signature _____ Date _____

By signing, I understand that this course will be added to my schedule and that I am responsible for all university fees and deadlines regarding this course.

Student’s name (please print) _____

Current Address _____ Major _____

_____ Advisor _____

City

State

Zip

Lander E-Mail Address _____ Student ID # _____

Class: (circle one) FR SO JR SR 2nd degree Graduate

Campus: (circle one) Main Campus University Center

To be completed by the Instructor of the Directed Independent Study Course...

Directed Independent Study (DIS): Discipline _____ Number _____ Sem Hrs _____

Course Title (special topics courses only) _____

Instructor’s Name _____ Instructor’s Signature _____

Semester / Year _____ / _____

To be completed by the Department Chair and College Dean of the Directed Independent Study Course...

In order for the course to be approved, the student must have at least junior standing; the request will not be approved if the requested course is already scheduled for the semester. Courses below the 300 level can not be offered by DIS. If the student wishes to repeat the course for a better grade, it may not be repeated by DIS. Faculty members may only teach one DIS course per semester.

Department Chair of Directed Independent Study Course Date

An approval by the College Dean signifies that all of the above conditions for the course have been met.

College Dean of Directed Independent Study Course Date

To be taught for pay: (circle one) Yes No

To be completed by the Office of the Registrar...

DISC _____ NUM _____ SEC _____ Semester/Year _____ Date _____