

APPLICATION FOR DIRECTED RESEARCH PROJECT ARTH 497

**School of the Arts
Department of Art History**

SECTION I.

Name _____ V# _____
Local Mailing Address _____
Home Telephone _____ Cell Telephone _____
Email _____ Semester/Year of Project _____/_____
Supervising Faculty _____

SECTION II.

Justification: Attach 2 copies of an outline of your proposed project to this form, including the following:

Rationale: Relevance to your degree program/professional goals

Procedure: How goals will be pursued/what School of the Arts, university, or outside resources will be used (including library, computers, museums, archives, etc.)

Content: The nature and scope of the project: research paper and agreed upon results.

SECTION III.

List All Other Courses for credit to be taken concurrently:

Course #	Credits	Course #	Credits
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Student should confer with a department advisor prior to registering for ARTH 497 to verify applicability to curricular requirements.

SECTION IV.

Registration Procedure: Submit completed form and justifications to the supervising faculty member for approval. Form should then be forwarded to Department Chair. Following department approval, an Override Permission Form is required for registration in to ARTH 497, which may be obtained from the Department of Art History. Failure to follow the appropriate registration process will result in withdrawal from course.

SECTION V.

Approvals (secure signature approval in the order below)

1. Faculty Supervising Project _____ Date: _____
2. Department Chair _____ Date: _____