

**MONTCALM COMMUNITY COLLEGE  
DIRECTED STUDY CONTRACT**

The use of **Directed Study** is as follows:

1. The Directed Study concept does not apply to remedial studies and it may not be employed near the end of a semester to fill requirements.
2. A Directed study course must be one that is not listed in the current MCC Catalog. It is an individualized educational experience requested by the student and supported by the faculty member. These courses are usually for advanced students or those who have exhausted regular college offerings.
3. To be eligible for a Directed Study course, a student must:
  - a) have exhausted regular college offerings in the discipline involved.
  - b) have at least a 3.0 (B) GPA or instructor approval.
  - c) not attempt more than one Directed Study contract per semester.
4. The student interested in Directed Study credit(s) must meet with a counselor or advisor who will discuss whether a Directed Study is appropriate and who will make arrangements with an instructor.
5. The instructor delivering the Directed Study course will complete a study plan for approval (on this form) and submit it to the appropriate instructional administrator.
6. Upon approval, the instructional administrator will arrange to add a one, two, or three credit course to the schedule with the appropriate discipline prefix e.g. HUMN299, SOCI299, etc.
7. Upon course addition the student will be registered in the Directed Study course by a Student Services Staff person.

**APPLICATION:**

Student's Name: \_\_\_\_\_ I.D.# \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street* *City/State/Zip*

Instructor's Name: \_\_\_\_\_

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

Course Number: \_\_\_\_\_ Code: \_\_\_\_\_ Credit/Contact Hours: \_\_\_\_\_ Semester & Year: \_\_\_\_\_

**REASON FOR REQUESTING DIRECTED STUDY:**

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**OVER**

**CONTRACT DETAILS:**

**DESCRIPTION OF COURSE CONTENT** (catalog description/teaching methods/texts):

**INSTRUCTOR'S EXPECTATIONS** (objectives/calendar/attendance requirements):

**EVALUATION METHODS** (grading--elements/relative value):

\_\_\_\_\_  
Counselor/Advisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**APPROVAL:**

\_\_\_\_\_  
Instructional Administrator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
V.P. for Academic Affairs Signature

\_\_\_\_\_  
Date

For Office Use Only:		
<input type="checkbox"/> Course entered into <u>Jenzabar</u>	<input type="checkbox"/> Student registered	<input type="checkbox"/> Copy to Instructor & Student
	<input type="checkbox"/> Submit for scanning	

