

WAYNE STATE UNIVERSITY LAW SCHOOL
AUTHORIZATION FOR DIRECTED STUDY

NAME OF STUDENT: _____

STUDENT ID: _____

TERM/YEAR: _____

J.D. PROGRAM: Credit Hours: 1 credit _____ 2 credits _____

Expected to fulfill writing requirement: Yes _____ No _____

To fulfill upperclass writing requirement: Directed study taken for two or more credits so long as the primary adviser is a full-time member of the faculty or, if an adjunct is the primary adviser, a full-time member of the faculty agrees to review the paper.

LL.M. PROGRAM: Credit Hours: 1 credit _____ 2 credits _____

TOPIC OR TITLE OF PAPER:

FACULTY SIGNATURE

ASSISTANT DEAN'S SIGNATURE
(required for J.D. program only)

Faculty Member (please print name): _____

By signing this form you authorize the Law School Records and Registration Office to add you to the amount of credits requested for the directed study.

STUDENT SIGNATURE

DATE

Please return this form to:
Wayne State University Law School
Records and Registration Office
471 West Palmer, Room 1223
Fax: (313) 577-9800 Phone: (313) 577-3979

**THIS FORM MUST BE SUBMITTED PRIOR TO THE LAST DATE OF
THE ADD/DROP PERIOD OF THE TERM SELECTED.**