

**DIRECTED INDEPENDENT STUDY (DIS) FORM**

**North Florida College**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student's Name: \_\_\_\_\_

Student ID Number: G \_\_\_\_\_

**Request for Academic Term:** \_\_\_\_\_.

(Example: Fall=202110, Spring=202120; Summer=202130)

Completion of this form does not constitute enrollment in the course. Registration for this course is contingent upon student meeting admission and pre-requisite requirements.

Prefix, Number, Section, and Course Reference Number:

\_\_\_\_ Prefix      \_\_\_\_ Number      \_\_\_\_ Course Reference Number  
(Generated by Enrollment Services)

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

Room Number: \_\_\_\_ Days: \_\_\_\_ Time: \_\_\_\_ : \_\_\_\_ - \_\_\_\_ : \_\_\_\_

Instructor's Signature: \_\_\_\_\_

Department Chair's Signature: \_\_\_\_\_

Dean of Academic Affairs's Signature: \_\_\_\_\_