

**COMPARATIVE LITERATURE 596 – DIRECTED READING AND RESEARCH**

**This form must be on file in the Department Office before the beginning of the quarter.**

NAME \_\_\_\_\_

UNITS \_\_\_\_\_

QUARTER & YEAR \_\_\_\_\_

INSTRUCTOR \_\_\_\_\_ INSTRUCTOR # \_\_\_\_\_

LETTER GRADE \_\_\_\_\_ S/U GRADE \_\_\_\_\_ (check one)

DESCRIPTION OF INDIVIDUAL STUDY

SIGNATURES: \_\_\_\_\_  
Student Date Instructor Date

\_\_\_\_\_  
Dept. Graduate Advisor Date