

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