

LAW 4093 DIRECTED RESEARCH REGISTRATION REQUEST FORM

Name: _____ Student Number: _____
Print

Project Title: _____

Supervisor: _____
Print Name

Please provide a brief description of the proposed project:

***I hereby agree to supervise a major independent legal writing program which
WILL or WILL NOT
include a scholarly paper that has a value of at least 50% of the final grade for this course.***

Supervisor's Signature: _____ Date: _____

I request registration in Law 4093 Directed Research

Fall Term 20____

Winter Term 20____

Student's Signature: _____ Date: _____

Approval
Associate Dean: _____ Date: _____

PLEASE RETURN TO THE GENERAL OFFICE