



OFFICE OF THE REGISTRAR  
 UNIVERSITY OF NORTH CAROLINA WILMINGTON  
 601 SOUTH COLLEGE ROAD • WILMINGTON, NORTH CAROLINA 28403-5618  
 PHONE: 910-962-3125 • HTTP://WWW.UNCW.EDU/REG

**PERMISSION TO ENROLL  
 UNDERGRADUATE DIRECTED INDIVIDUAL STUDY**

\_\_\_\_\_ Student ID # \_\_\_\_\_  
 Last First Middle

UNCW Email Address: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

has permission to register for \_\_\_\_\_ with \_\_\_\_\_ hours credit for the \_\_\_\_\_ semester.  
 Course Credit Hours Term Year

Instructor (please PRINT full name): \_\_\_\_\_ Instructor ID: \_\_\_\_\_

Descriptive Title of Course: \_\_\_\_\_

**PLEASE REFER TO THE CATALOGUE DESCRIPTION OF DIRECTED INDIVIDUAL STUDY BEFORE RESPONDING TO THE FOLLOWING.  
 IF ADDITIONAL SPACE IS REQUIRED, YOU MAY ATTACH AN ADDITIONAL SHEET.**

**Specific Course Objective(s) or Project Description**

**Rationale for Course** (background, experience, etc.)

**Method(s) of Evaluation for Determining Final Grade** (oral reports and/or writing and reading requirements, required library and/or lab hours, meetings with instructor, etc.)

If this course is not [approved for Explorations Beyond the Classroom](#) and the student wants the DIS to fulfill the EBC requirement, the instructor/advisor will need to submit a [substitution/waiver form](#).

If this activity involves travel outside the U.S., an International Academic Travel Packet must be completed and approval obtained through the Office of International Programs (Friday Annex 118).

\_\_\_\_\_  
 Office of International Programs Date

**Grades are due during the normal grading period at the end of each institutional term.**

**Approved:**

\_\_\_\_\_  
 Instructor Date

\_\_\_\_\_  
 Dean Date

\_\_\_\_\_  
 Department Chair Date

Please send the completed form with signatures to the Office of the Registrar for processing.