COURSE BY SPECIAL ARRANGEMENT/DIRECTED STUDY/THESIS (GRADUATE & UNDERGRADUATE CONTINUING ED STUDENTS)

WESTFIELD STATE UNIVERSITY
OFFICE OF THE REGISTRAR

STUDENT'S NAME:_____ COLLEGE-WIDE ID NUMBER: _____

CELL PHONE: _____ CUMULATIVE GPA: _____

CREDITS ENROLLED IN CURRENT SEMESTER: _____
(excluding this course)

COURSE PREFIX	COURSE NUMBER	TITLE	
CREDITS	SEMESTER/YEAR	COURSE INSTRUCTOR (PRINTED)	

1. How does this course fit into the student's program of study and why is it NECESSARY this semester?

_____

_____

_____

2. Attach SYLLABUS for details of the course, learning outcomes, readings, assessment and grading.

REQUIRED SIGNATURES:

1. _____
STUDENT SIGNATURE DATE

If approved to register for this course, please drop the following course(s) from my schedule, if applicable:

2. _____
COURSE INSTRUCTOR SIGNATURE DATE
Printed Instructor's Name: _____

3. _____
DEPARTMENT CHAIRPERSON SIGNATURE DATE
Printed Chair's Name: _____

4. _____
IF NECESSARY, HONORS PROGRAM DIRECTOR SIGNATURE DATE

5. _____
DEAN'S SIGNATURE DATE

- *This form must be submitted by the last day of add/drop to the student's College Dean.*
- *If registered after the published billing due date, students have five days to submit payment via myWestfield. Late fees may be incurred if not received within five days.*
- *First-Year and non-matriculated students are ineligible for these courses.*
- *Graduate students must have completed 15 credits toward degree to be eligible for Special Arrangement or Directed Study.*
- *Undergraduate students may take no more than one Special Arrangement per semester, and no more than four in a degree.*
- *Only matriculated students may use tuition waivers, and, only if necessary to meet the requirements of the student's program of study. Westfield State employees may only use their waivers for courses that are never offered outside the S.A../D.S. format.*
- *If registration into this course brings your credit total to that of the MA state requirement for medical insurance, it is your responsibility to waive the insurance online or understand you will be charged. Please contact the Student Accounts Office with any questions about health insurance.*
- *A $25 late add fee may apply if form is submitted after the end of the add/drop period.*

_____ Processed by Registrar