

UNIVERSITY OF SOUTHERN MAINE  
OFFICE OF THE REGISTRAR

**CAS DIRECTED STUDY APPROVAL**

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Social Security Number

Date

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Student Name: Last

First

Middle Initial

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CN #

Course #

Course Title

Number of Credits

Check one:

Fall

Spring

Summer

Year:

Your proposal for a CAS Directed Study Project must address **each** of these four topics:

1. **Learning Objectives**: What will you learn to do, know, or understand as an outcome of this project? What question are you attempting to answer or what need are you trying to address? How does it relate to your CAS plan of study?
2. **Activities**: Describe what you will do? Include activities, events, research, data collection and timeline.
3. **Resources**: What will you need for the project? Include bibliography, people, agencies, budget and equipment.
4. **Culminating Project/Presentation**: What will you produce which your faculty sponsor will evaluate for a final grade? Where and when will you make your external presentation?

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Approval of Instructor (who will supervise you)

Date

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Approval of Department Faculty Member

Date