Specialized Directed Study Proposal

STUDENT:		NOBTS-ID:	
TELEPHONE:	E-MAIL:		
SPECIALIZATION:		SEMESTER:	YEAR:
(The student should complete the above information and the developing the details of the seminar including objectives should sign and date the form and forward it and the syllabus the Directed Study proposal to the Dean of Graduate Studies. Up registrar's office. (No student will be allowed to registe Professional Doctoral Programs.)	s, requirements, due dates, etc s to the Office of Professional I pon approval from the Dean of G	The professor should design a syllabus to Doctoral Programs (ProDoc). The Associate raduate Studies, the ProDoc office will ema	reflect the above- mentioned details. The professor e Dean will sign and date the form and forward il the completed forms to the student, professor and
Briefly describe the proposed Directed Stu	udy:		
How does this proposal relate to your spec	cialization and/or anti	cipated project in ministry:	
Professor's Comments (see attached sylla	bus):		
Associate Dean's Comments:			
Student Signature	Date		
Approved By:			
Professor	Date	Division	ı
		OTE: Forms may be mailed or so	panned as an a mail attachment and
Associate Dean of Professional Doctoral Programs	_	NOTE: Forms may be mailed, or scanned as an e-mail attachment and sent directly to a professor. Completed forms should be returned to: The Office of Professional Doctoral Programs	
		3939 Gentilly Blvd. New Orleans, LA 70126	
Dean of Graduate Studies Revised July 2024	Date	E-mail: prodoc@nobts.edu	