



School of Systems Biology
10900 University Blvd., MS 5B3
Manassas, VA 20110

MS DIRECTED STUDIES / RESEARCH

Instructor-Student Agreement

Student Name _____ Mason ID # _____

Semester _____ Instructor _____

_____ # credit hours **BIOL 693 Directed Studies in Biology** (1-8 credits)

_____ # credit hours **BIOL 793 Research in Biology** (1-3 credits)

_____ # credit hours **BINF 796 Directed Reading and Research** (1-6 credits)

Course Title (30 characters max):

Please fill in the following information (may be attached on a separate sheet):

1. Focus and Learning objectives of this individualized course:

2. Student activity (e.g. readings, papers, presentations, lab or field study, etc.):

3. Student to submit the following (specify report, presentation, etc. and deadlines):

4. Specific meeting arrangements (e.g. meeting times and locales, research site, etc.)

Student Signature

Date

Instructor Signature

Date

Advisor Signature

Date

School of Systems Biology, Director

Date

Send to the Dept. Coordinator for processing