***EDUCA590 Directed Study Application Form\_MCouns***



**Te Kura Toi Tangata**

**School of Education**

**RESEARCH PROPOSAL**

Attach a research proposal to this form.

*See EDUCA50 Directed Study Guidelines for research proposal requirements.*

**APPROVAL AND ENROLMENT STEPS**

1. Complete the student section of this form and attach a copy of your research proposal.

2. Send this form and your proposal to your supervisor.

3. Apply online through MyWaikato for EDUCA590.

4. Accept enrolment agreement.

5. Pay fees and charges.

**STUDENT**

*Complete this section and send form with your research proposal to your supervisor.*

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intended Start Date (Monday): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*You may start in any week of the academic year. The duration of the Directed Study is 26 weeks.*

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SUPERVISOR**

*Complete this section and forward to Programme Administrator Postgraduate and Research.*

[ ]  I agree to supervise this student’s Directed Study as outlined in the attached research proposal.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HEAD OF SCHOOL OR NOMINEE**

[ ]  I acknowledge the supervision panel for this 30point Directed Study.

**PROGRAMME LEAD OR NOMINEE**

*Complete this section and return to Programme Administrator Postgraduate and Research.*

[ ]  I approve this student’s proposed Directed Study.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: