DEPARTMENT OF HISTORY, UH MĀNOA 2530 Dole Street, Sakamaki A203 Honolulu, HI 96822-2383

Student name:

HIST 699: DIRECTED RESEARCH

Telephone: (808) 956-8358

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ENROLLMENT FORM

- Submit this signed form, and attached course outline or syllabus, to the History graduate program (gradhist@hawaii.edu). The HIST 699 CRN will be emailed to you for registration.
- If HIST 699 is to substitute for a required core course, submit both this form and the **Graduate Division Course Substitution / Waiver form** to the Graduate Chair. This option is only approved when a required core course is otherwise unavailable.

Email:

• All forms must be submitted before registration deadlines.

Semester / year:		Cred	its:	
		Course Outline		
expected learning	outcomes; number	f proposed coursework. State and frequency of meetings; . Quantity of work and contact h	reading list; expected v	written or other
		Signatures		
Instructor:				
	Name	Signature	Date	
Committee chair:				
	Name	Signature	Date	
Graduate chair:				
	Name	Signature	Date	August 2021