



**SIMON FRASER UNIVERSITY**  
**School of Engineering Science**

**Directed Studies/Special Project Lab Approval Form**

**Course title:**

**Course number:**

**Student's name and student number:**

**Previously-taken directed studies/special project labs:**

**Student's signature:**

**Supervisor's signature:**

**UCC Chair's signature:**

**Semester approved for:**

*The student and the supervisor agree that copies of the deliverables will be filed with the UCC Chair upon completion of the course and understand that failure to do so may result in the course being disallowed as an approved course.*