**READING COURSE FORM**

**Theological Studies**

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| **Student Name:** | **Student ID#:** | **Year/Term:** |
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| **Title:**  *(to appear on transcript, limit 30 characters, including spaces)* |  |
| **General Description:**  *(insert as much text as necessary)* |  |
| **Reading Requirements:** |  |
| **Assignments:** *(including the weight of each assignment, and deadlines)* |  |
| **Other Course Expectations:** *(ie. sitting in on a particular class, meetings with instructor, etc.)* |  |

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| **Signatures:** | | **Date:** |
| **Student:** |  |  |
| **Instructor:** |  |  |
| **Director of Theological Studies:** |  |  |
| **Dean:** |  |  |

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| **TS 691 Section:**  Course scheduled with scheduling office: | **OFFICE USE ONLY:**  **Permission #:**   * Yes No Date: |  |
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*Last updated December 2014.*