## East Carolina University - College of Nursing PhD in Nursing Program NURS 8255 Directed Research Form

Student Name:	Banner ID #:
CRN#:	Faculty of Record:
# of Course Hours:	Semester to Complete:
Date Form Completed:	
Does your Directed Research require working in a Clinical Facility? Yes No	
	al Facility, have you completed/updated Rotation Manager? required that students have their information up to date in to collect data in <u>any</u> clinical facility.
program. This internal form remains in the stu	o track student directed research experiences throughout the udent's file as a record of student's research experiences to meet be useful when writing reference letters for our PhD graduates.
	May be repeated for a maximum of 12 s.h. Research g faculty member for the purpose of mentorship and
1. Faculty description of the researc	ch activity for the student:
2. Student learning objectives for th	ne experience developed by faculty and student:
3. Student activity to meet stated ob	ejectives:
4. Faculty signature:	Date:
5. Student signature:	Date:
End of Semester Evaluation (Comple	eted by Advisor): Satisfactory Unsatisfactory
Grade Received for NURS 8255 Cou	irse: Faculty of Record Initials:
Advisor's Comments (Required if Uns	satisfactory Evaluation):

<sup>\*\*</sup>Any student taking Directed Research or Dissertation Hours in a clinical setting is required to have Rotation Manager up to date prior to the first-class day. The Directed Research form should be completed and signed and attached to the registration form for the corresponding semester in the PhD Program office before the first-class day.