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Graduate Project Proposal

Please complete this form in pen. Complete this form prior to submission of your Project Advisory Group Approval form. For assistance with this process, meet with your current advisor or Department Chair well in advance of the deadline for submitting this form. **Deadlines may be found in the policies and Thesis Manual.**

LAST NAME: _____ FIRST NAME: _____

STUDENT UID: _____ EMAIL: _____@floridapoly.edu

STUDENT SIGNATURE: _____ DATE: _____

Step 1: Program Information

CATALOG YEAR: 20_____

<input type="checkbox"/> Master of Science in Computer Science	<input type="checkbox"/> Computer Science
	<input type="checkbox"/> Data Science
<input type="checkbox"/> Master of Science in Engineering	<input type="checkbox"/> Computer Engineering
	<input type="checkbox"/> Electrical Engineering
	<input type="checkbox"/> Engineering Management
	<input type="checkbox"/> Mechanical Engineering
	<input type="checkbox"/> Robotics

Step 2: Identify Proposal Review Advisory Group

You may have up to three (3) members for your proposal review committee.

	PRINT NAME	DEPT
Advisor:		
Reviewer:		
Reviewer:		

Department Codes: Computer Science (CS), Data Science & Business Analytics (DSBA), Electrical & Computer Engineering (ECE), Mechanical Engineering (ME), Mathematics (MA), Natural Sciences (NS)

Step 3: Decision

Choose reason for project designation: Project Option Student Opts-in Dept Recommendation

Date of Review: _____ Approved Denied Resubmit

Comments:

Dep't Chair Signature: _____ Date: _____