University of South Alabama Instructional Design & Development Program

ISD 620 Research in Instructional Technology PROPOSAL

Student's Name:

Date:

In the space provided below (or on a separate sheet not to exceed 1 page), summarize the ISD 620 project, specific project activities, timeline, major research questions, data collection and analysis, and anticipated results. Be sure to describe the specific product of the course – for example, a journal article, presentation proposal, grant application, etc.

Signature	of Advisor:	Date:	
Status:	□ Approved	□ Not Approved	
		Date:	
	(Chair, ISD 620 Review Co	mmittee)	

NOTE: This proposal must be submitted by the last day of scheduled courses in the semester **prior to** the semester in which the student intends to enroll in ISD 620