

School of Computing Graduate Course Request Form ISC 598 – ISC Project

Student's Name:_		
Jag Number:		Semester/Year:
Project Advisor's	Name:	
General Descripti	on of Proposal Work:	
		essfully defended the project proposal oject Proposal Defense:
above and in the responsibility to c	attached documents	ed, independent study course as specified (if any). I understand that it is my frequently with my PROJECT ADVISOR and appleted on time.
Date:	Student's Signature	·
	_	this student's work as specified above, to I, and to assign an appropriate grade at its
Date:	Project Advisor's Sig	nature:
Approved:		
Date:	Graduate Director's	Signature: