

Rochester Institute of Technology
Kate Gleason College of Engineering

Graduate Independent Study Proposal

Student name: _____ Student UID# _____

Project Title: _____

Faculty Advisor: _____

Independent Study Advisor: _____

Date of Application: _____ Semester: _____

Please attach a typed statement of Objectives, Description of Proposal and Method of Evaluation (e.g, 40% midterm report, 40% final report, 20% oral presentation)

Approvals:

PhD Student, Name	Signature	Date
Faculty Advisor, Name	Signature	Date
Independent Study Advisor, Name	Signature	Date
PhD Program Director, Name	Signature	Date