

**NORTH AMERICAN UNIVERSITY
COMPUTER SCIENCE DEPARTMENT**

CONCENTRATION OF: _____

CAPSTONE TOPIC APPROVAL FORM

1.0 STUDENT INFORMATION

Student's Name	Student ID	
Email Address	Local Phone Number	
Current Term	Academic Year	Total No. of credits

2.0 CATEGORY CHARACTERIZATION

Indicate which category characterizes your Senior Design project:

Independent Research and Senior Design Report

Project Team Research and Senior Design Report

List team members (maximum two) _____

3.0 DESCRIPTION OF PROPOSED PROJECT

Project Title:

Brief Description of Project:

4.0 SIGNATURES:

Student	DATE
Project Advisor	DATE
Department Head	DATE