EASTERN MICHIGAN UNIVERSITY
DEPARTMENT OF MATHEMATICS & STATISTICS
RESEARCH STUDY
FORM

1 credit – STAT 691 _____	**2 credits – STAT 692 ___X____**	3 credits – STAT 693 _____

(PLEASE CHECK ONE)

STUDENT INFORMATION:

Name: _____Jeffrey Osiwala_____   **I.D. #: E**____01247880_____

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Level: UG _____ GR __X____   **Applied Statistics:** Major X_____ Minor _____

Semester: Winter _____ Summer I _(May) Summer II _____ (July) **Fall X** **Year: 2020**

REASON FOR TAKING COURSE: REQUIRED FOR THE PROGRAM_____ as

_____

_____

_____

Supervising Professor Name: ___Dr. Khairul Islam_____

Student Signature: _Jeffrey Osiwala_____ **Date:** 07/31/2020_____

****************************DO NOT WRITE BELOW LINE TO BE COMPLETED BY SUPERVISING FACULTY ****************************

ISSUED CRN NO. #_____ (DEPARTMENT SECRETARY WILL ASSIGN NUMBER)

WRITE A BRIEF DESTRIPTION OF THE PROPOSED RESEARCH STUDY:_____

_____MODEL BASED ANALYSIS OF CATEGORICAL DATA_____

_____

_____

GRADING PROCEDURE: PRESENT IN GRC OR OTHER CONFERENCES OR AS PER INSTRUCTOR'S GRADING POLICY

_____

Khairul Islam

_Khairul Islam_____   07/30/20_____

SIGNATURE OF SUPERVISING FACULTY   *DATE*

SIGNATURE OF DEPARTMENT HEAD   *DATE*