

CSD INDEPENDENT STUDY PROSPECTUS

Courses 15-591, -592, -593, -594

Student:	Andrew ID:		
Last Name	First Name		_
Today's Date:	Semester to be Er	nrolled:	
Title of Project:			
Units Proposed by Student:	Project Advisor's N	Name:	_
Project Advisor's Andrew ID	Project Advisor's	s Signature	
Academic Advisor's Andrew ID	Academic Advis	or's Signature	_
You are not per	nitted to receive credit	AND be paid for the same work!	
Goals of the research project:			
Work to be completed (use another page 1)	age if necessary)		
		t Study students at an end-of-semester poster fall, and at the <i>Meeting of the Minds</i> in the spring.	
The information below will be	filled out by the relev	ant program director:	
Course #:			
		Date:	_
		Mark Stehlik at mis@cs.cmu.edu	