



INDIVIDUAL GRADUATE ENROLLMENT

Type of Project: ☐ Independent Study ☐ Tutorial ☒ Thesis ☐ Internship


1. 20031193 MS Data Science and Analytics Spring 2020
CWID Degree or Certificate Program Registration Term

2. Cannon Thomas Woolard
Last Name First Name Middle Name

3. cannontw@g.cofc.edu 910 367 0025
College of Charleston Email Phone Number

DEPT. (EVSS)	NO. (690)	CR. (3)	PROJECT TITLE
DATA	699	3	A Structure-Fitting Process for Gamma Ray Bursts

Description of Project: (attach another sheet if needed)	See Abstract Attached
Research Requirements: (including bibliography, materials, equipment - attach another sheet if needed)	See Facilities and References Attached
Evaluation Criteria and Procedures:	An oral defense on original work from volunteer committee members: Dr. Michael Larsen Dr. Ayman Hajja Dr. Kris Ghosh


Student Signature

01-14-2020

Date

Faculty Supervisor Signature

PRINTED LAST NAME

Date

Graduate Program Director Signature

Date

Graduate School Dean Signature

Date

GSO STAFF ONLY

Processed by: _____ Date: _____

CRN: _____ Section: _____