DEPARTMENT OF MANAGEMENT INFORMATION SYSTEMS

Graduate Student Research Agreement for Course: ISQA 8900

This form must be completed and signed before the end of the first week of class. Failure to do so may result in Administrative Withdrawal from the course waives any refund of tuition.

Student Information:

Name:		NU ID:
Year:	Semester:	Credit Hours:
Name of MIS class if su	bstituting:	
Independent Research I	Project Title:	
Description of Research	າ Project (include output of the	project with page and/or other requirements
Method for evaluation o	f the project:	
Specify text or required	readings:	
Timetable for completio	n of the project	
End date for project comp	pletion (i.e. usually the Friday bef	ore Finals Week):
Frequency of student mee	etings with academic supervisor:	
List Intermediate deadli	nes (i.e. date literature search	or paper outline is due):
Signatures:		
	to the responsibilities of this rese	earch contract.
Student:		Date:
Faculty Supervisor:		Date:
ISOA GPC Chair		Date: