THESIS RESEARCH CMST 8000

NAME:			
STUDENT ID#:			
SUPERVISOR:		Section:	Credit Hours:
SESSION/TERM: Fall	Spring	Summer	
Student's Signature:		DATE:	
Supervisor's Signature:		DATE:	
Thesis Research (1-12 per sem.) "S" / "U	I" grading.		
Description of product (attach extra	pages as needed):		

This form must be HAND-DELIVERED to 136 Coates and the student must wait while the class is added.