

GRADUATE INDEPENDENT RESEARCH FORM

Please print clearly. Return completed form to the Office of Student Experience/Registrar at NSCAD.

FAMILY NAME:	GIVEN NAMES:
NSCAD STUDENT NUMBER:	GRADUATE PROGRAM:
TERM IN WHICH THE RESEARCH WILL BE CARRIED OUT:	

SELECT A 3-CREDIT* GRADUATE RESEARCH COURSE IN WHICH YOU WISH TO ENROLL:

*AT THE GRADUATE LEVEL A 3-CREDIT COURSE REPRESENTS AT LEAST 9 HOURS OF WORK, ON AVERAGE, PER WEEK, PER SEMESTER

- FHIS 6200 INDEPENDENT RESEARCH IN FILM HISTORY (LAS)
- GRAD 6X03/6X06/6X09 STUDIO INTERNSHIP
- GRADUATE STUDIO: MFA 6003 (VISITING STUDENTS ONLY), MFA 6006, MFA 6009
- AHIS 6700 INDEPENDENT RESEARCH IN ART HISTORY (LAS)
- CULT 6110 INDEPENDENT RESEARCH IN CONTEMPORARY CULTURE (LAS)
- GRAD 6603/6606/6609 RESEARCH INTERNSHIP

TITLE OF YOUR RESEARCH PROJECT: _____

IS THERE AN UNDERGRADUATE WORKSHOP OR SEMINAR LINKED TO YOUR RESEARCH PROJECT?

COURSE TITLE _____ MATERIALS FEE AMOUNT: _____

PLEASE ATTACH THE FOLLOWING:

1. STUDENT: SHORT DESCRIPTION (150-300 WORDS) OF THE COURSE OF RESEARCH (PLEASE INDICATE THE ROLE OF ANY SUPPORTING WORKSHOPS THAT YOU REQUIRE AS PART OF YOUR RESEARCH.)
2. STUDENT AND RESEARCH SUPERVISOR: SET OF MILESTONES TO BE ACHIEVED, WITH DUE DATES AND % OF FINAL GRADE
3. RESEARCH SUPERVISOR: CRITERIA FOR THE EVALUATION OF THE OUTCOME OF THE INDEPENDENT RESEARCH

STUDENT'S SIGNATURE:	DATE:
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APPROVALS:		
NAME—RESEARCH SUPERVISOR	SIGNATURE	DATE
NAME—GRADUATE DIRECTOR (MFA/MDES)	SIGNATURE	DATE

Note to Research Supervisor: The final grade for the research project is due by the end of the semester in which the Independent Research is registered. If an extension is required, a grade of INC should be recorded.

Note to Student: Submit final work to your Research Supervisor at least a week before the deadline, to allow them sufficient time to evaluate it.