



## Graduate School--Central Connecticut State University, New Britain CT 06050 Special Project Proposal Form

Dear Student and Special Project Advisor:

The second page of this document is a special project proposal form for submission to the Graduate Studies office to initiate the preliminary review process for a student's special project. It is being provided to you as an emailed item for your convenience and to save on mailing or pick-up. You may complete the special project proposal form in either of two ways. You can print the document and fill it out by hand, down to the sections where required faculty approval signatures and dates are needed.

You may also complete portions of the special project proposal form down to the same sections electronically. Use your computer to type in or check off the form's fields. Answer boxes may be noted by clicking your mouse. Shaded areas are text fields for typing. Jump from field to field by using the tab key or positioning your mouse. If you choose to complete the special project proposal form with your computer, **save or print this packet for your records**. For the University's purposes, a student's completed special project proposal form must be submitted as follows.

When you have finished typing this material down to the required faculty approval signatures area, the form should then be completed by the primary advisor and other committee members. They must sign the form indicating that they have read and approved the special project outline. **THE COMPLETED FORM AND ONE (1) COPY OF THE SPECIAL PROJECT OUTLINE should then be included in a packet prepared for presentation to appropriate academic officials of the University.** Through and with the assistance of your primary special project advisor, your packet of materials is brought forward to the appropriate academic dean and to the Dean of Graduate Studies.

If you experience any difficulty with this information or require additional assistance, please contact the Graduate Studies Office or the Enrollment Center so that you may reach staff members who can help you.

Thanks.



**Graduate School--Central Connecticut State University, New Britain CT 06050  
Approval of Special Project Proposal**

**TO: Dean of Graduate Studies**

**FROM:**

<i>Primary Special Project Advisor</i>	<i>Department</i>

**SUBJECT: Approval of Special Project Outline**

**Attached you will find one copy of the approved Special Project outline prepared by:**

<b>Name:</b>	<b>Social Security #:</b>
<b>Street:</b>	<b>Telephone Nos.: (H) ( )</b>
<b>City/St/Zip:</b>	<b>(W) ( )</b>
<b>Country:</b>	<b>Date:</b>
<b>Major:</b>	<b>Degree Program:</b>

<b>Title of Approved Special Project Outline:</b>
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If human or animal subjects are involved, your proposal to HSC <input type="checkbox"/> or IACUC <input type="checkbox"/> should be attached.
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**REQUIRED SPECIAL PROJECT PROPOSAL SIGNATURES:**

<b>Primary Special Project Advisor:</b>
<b>Date Approved by Primary Special Project Advisor:</b>
<b>Committee Member:</b>
<b>Committee Member:</b>
<b>Committee Member:</b>

**ACCEPTED BY:**

<i>Dean of Graduate Studies</i>

<b>Date Accepted by Dean of Graduate Studies:</b>
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