

APPLIED RESEARCH PROJECT FORM (MMC 6950)

Department of Journalism and Digital Communication USF St. Petersburg

[This form must be completed by the student and signed/approved by the Committee Chair prior to registration. An approved proposal is required before students may register for Applied Research hours. Please attach the approved ARP proposal to this form.]

1. STUDENT & PROJECT INFORMATION

Name _____ U# _____

E-mail Address _____ Expected graduation semester: _____

Project Title _____

[Attach proposal].

2. COMMITTEE INFORMATION

[Required: Committee Chair and at least one additional Committee Member from the department. In addition, Students may add up to one additional committee member from outside the department.]

Committee Chair:

Name _____ Signature _____ Date _____

Committee Member #1:

Name _____ Signature _____ Date _____

Committee Member #2:

Name _____ Signature _____ Date _____

3. APPROVAL

[This section will be complete when the ARP is approved.]

This student has successfully fulfilled her/his Applied (Check Here) Research Project.

Committee Chair:

Name _____ Signature _____ Date _____

Committee Member #1:

Name _____ Signature _____ Date _____

Committee Member #2:

Name _____ Signature _____ Date _____