



## OPERATIONS RESEARCH GRADUATE PROGRAM

# Graduate Student Project/Study Contract

You must complete this form to your supervising faculty member's satisfaction at the start of the semester. Then, both you and your supervising faculty member must sign and date it for the following courses.

**OR 610** (Independent Study-Master's level)      **OR 810** (Independent Study-Ph.D. level)

**OR 693**      **OR 893** (Dissertation Research- Before Prelim)

**OR 695** (Master's Thesis Research)      **OR 895** (Dissertation Research- After Prelim)

## APPROVAL

\_\_\_\_\_  
Professor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Student Name \_\_\_\_\_ ID# \_\_\_\_\_

Course # \_\_\_\_\_ Semester \_\_\_\_\_

Proposed Credit Hours \_\_\_\_\_ Responsible Faculty \_\_\_\_\_

Title of Project \_\_\_\_\_

Brief Abstract of Proposed Effort and Statement of Objectives

Criteria of Performance (Projection of “products” to be submitted and graded)

Project Time Schedule and Milestones