

Instructions:

This form is for students enrolled in the Master of Science in Human-Computer Interaction (MS-HCI) Program who choose the **project option**. *This is NOT the MS Special Problems (8903) Form.* The semester prior to undertaking the project, the student must find a faculty member willing to supervise the project and develop a project proposal. Complete this form in consultation with the IC faculty member who will be responsible for supervising your project and assigning your grade. Bring the completed form to the School of Interactive Computing Graduate Programs Office in TSRB 224. You will automatically receive an email when your permit is entered.

Student Name (please print): _____

GT ID Number: _____ **Email:** _____

Academic Term: Fall Spring Summer **Year:** 20_____

Credit Hours: _____ Be sure to check credit hours for proper registration amount. Variable hour courses' default is one hour of credit. You must change the hours in OSCAR to the proper credit total at the time you register. **NOTE:** Each credit hour must represent AT LEAST 50-60 hours of work by the student.

Project Title: (please print) _____

(ATTACH PROJECT PROPOSAL TO THIS FORM)

The project proposal should be about 2 or 3 pages and should include the following:

- Problem Statement or Project Goals
- Solution Proposal or Approach
- Schedule of Work
- Expected Results or Outcome (Deliverables)

The attached proposal was developed under the advisement of a faculty member and is a fair representation of the work I expect to accomplish to complete this project.

Student's Signature: _____ **Date:** _____

NOTE: It is your responsibility to register for the course after the permit has been placed on the registration system. The act of being approved for the course by the faculty member does not register you in the course.

Supervising Faculty Member:

I agree to supervise this student in the performance of a Masters project during the specified term, and certify that the proposed work represents an appropriate effort for the credit hours awarded.

NOTE: Each credit hour must represent AT LEAST 50-60 hours of work by the student.

Name (please print) _____

Signature _____

Date: _____

MSHCI Coordinator Approval: _____ **Date:** _____