INDEPENDENT RESEARCH REGISTRATION FORM  
CIVE 797, CONE 797, ENVE 797

Instructions: Complete the form, obtain the Project Advisor’s signature and approval from the Graduate Advisor. Return the completed form to the CCEE Department at ccee@sdsu.edu. You will then be given the schedule number and/or add code to enroll in this course.

Name: ______________________________________________________ Red ID___________________

Project Advisor’s Name:_________________________________________________________________

Semester: _______________     Course Abbrev/Course #: ___________________

Units (1-3):___________

Title of Research: ______________________________________________________________________

Plan A - Thesis or Plan - B Project: _______________________________________

Have you enrolled in any other Special Study Courses?  
yes _____   no_____

If yes, give the following information:

Semester: _________________________________

Instructor: _______________________________

Grade: ______________________

NOTE: Please provide a copy of your Project/Paper to your Project Advisor and the CCEE Department.

Signatures                        Date

Schedule # _______________                  Student  ___________________________________________

Section # _______________                  Project Advisor_____________________________________

Graduate Advisor ______________________________________