

Student Person Number: _____

CDSE Project Plan Approval Form

This form, along with the dissertation prospectus and the student's current unofficial transcript, must be completed and submitted to the CDSE Director of Graduate Studies by the first day of the 2nd semester in the Ph.D. Program.

CDSE Ph.D. Course Requirements:

- 72 total hours required for graduation, up to 36 hours may be research supervision
- 36 hours must be unique to the CDSE Ph.D.
- Only 6 hours of research supervision from M.S. may satisfy Ph.D. requirement
- 30 hours of CDSE Focus Area courses, at least 9 in each area, taken for a letter grade.
- Minimum GPA of 3.2 cumulative for the CDSE Focus Area courses.
- If there is a change in a course or the semester a course is taken, it must be approved before the change is made. Changes should be made using the course change form. Please see the Course Change form for deadlines and change instructions.

By signing this form, the student's Ph.D. committee indicates:

1. Their approval of the courses indicated for satisfying the CDSE Ph.D. Focus Area course requirements.
2. They have reviewed the dissertation prospectus and discussed it with the student and its alignment with the courses listed herein and the CDSE Ph.D. program.

Ph.D. Committee:

For CDSE Affiliation, indicate one of "Core", "Associate" or "None".

	Printed Name	Signature	Date	Dept. Affiliation	CDSE Affiliation
Advisor					
Core Member					
Core Member					
Additional Member					
Additional Member					

Indicate courses for which satisfaction of the CDSE Focus Area requirement is sought. There must be at least **three** courses (**nine** hours) in each section with an additional course (**three** hours) in **one** of the sections. Indicate the semester and grade achieved or, if the course has not yet been completed, indicate the planned semester and "N/A" in the Grade slot. If the course is an independent study please list faculty advising the independent study and complete the Independent Study Approval form.

Data Science:

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Applied and Numerical Mathematics:

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

High Performance and Data Intensive Computing:

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Course: _____ Semester: _____ Grade: _____

Additional Committee Comments/Requirements:

Student:

By signing this form, the student indicates:

1. They have read and understand the form requirements (listed on page 1).
2. They understand that if a course has not been completed, they are obligated to complete the course, satisfying the G.P.A. requirement, in order to enter Ph.D. candidacy. Or they must submit a Course Change to amend their plan.
3. That all course information for courses that have been completed is accurate and matches the attached transcripts.

Printed Name: _____

Person Number: _____

Signature: _____

Date: _____

CDSE Director of Graduate Studies

Printed Name: _____

Signature: _____

Date: _____