

Capstone Application Form

This form should be filled out by a student wishing to complete their capstone experience for the Mathematics Graduate Program. This form does not need to be completed if the student is taking a course officially designated as a capstone course. Otherwise the student should complete this form, attach all necessary documentation of the course, and submit it to the departmental secretary at least two weeks before the start of the relevant semester.

To be completed by the student:

1. Name of Student _____

2. Name of Instructor _____

3. Semester/ Year _____
(when the course will be taken)

4. Name of Second Reader _____

5. Please attach a syllabus/plan for experience.

(Should identify the material covered, the nature of the project or paper, and the expectations for the completed work.)

Student Signature _____ Date _____

Faculty Mentor Signature _____ Date _____

Second Reader Sig. _____ Date _____

(the student should submit this signed form and attached documentation to the department secretary.)

(over)

Department Secretary, please obtain the following signatures, then send copies of the completed form to the Dean's office and the requesting student and file a copy.

Received by the Department of Mathematics on _____

Approved Grad. Program Dir. _____ Date _____

Approved Department Chair _____ Date _____

Approved Steer. Com. Chair _____ Date _____

(If one of above is the faculty mentor, another member of Steering Committee should sign)
