Request for Research Project
CYBER/DS/HCDD/IST/SRA 494

494 is available for juniors and seniors who wish to undertake a research project on a topic of special interest to them. The student’s work must be supervised by a faculty member. The student is responsible for finding a College of IST faculty member willing to serve as the instructor. Please complete the following information with the instructor and then set up an appointment with your adviser to review this application form.

You must obtain approval signatures, attach required documentation, and return this form to the IST Advising Center in E103 Westgate Building by the end of the Add/Drop period.

Student Name: ____________________________ PSU ID: 9 - ____________
Major: _______ Semester Classification: ____________ Phone: ______________
Faculty Member you will be working with: (print clearly) ____________________________
Your Adviser: (print clearly) ________________________________________________
Number of credits for which student is enrolling: __________

Please circle the appropriate 494 course:

CYBER  DS  HCDD  IST  SRA

Please circle the appropriate semester/session and write in the year:

Fall _____ Spring _____ Summer______ (1st 6-week) Summer______ (2nd 6-week) Summer______ (other)

Required Documentation:
1. Attach a paragraph describing this research project.
2. Both the student and faculty member must sign the attached paragraph.

Please ✓ appropriate box, if applicable:
☐ Course Substitution Request for ____________ *(Assoc. Dean’s signature required below)
☐ Honors Option: Student must complete SHC online form by the deadline specified at:
https://www.shc.psu.edu/academic/resources/dates.cfm

Signatures of Approval:

Student: ____________________________ Date: __________________
Faculty/Instructor: ____________________________ Date: __________________
Adviser: ____________________________ Date: __________________
Director, Advising Center: ____________________________ Date: __________________
Associate Dean: ____________________________ Date: __________________