

Record of Ed.S. Project/Master's Project Completion

This form is submitted by the student's Major Professor and is used to change the grade for Ed.S./Master's project hours (EDG 6975).

Last Name	First Name	USF ID#
-----------	------------	---------

Department	Program	Degree
------------	---------	--------

Term	Year	Date Project Approved
------	------	-----------------------

Course Number	Current CRN (5 Digit)	# of Credit Hours
---------------	-----------------------	-------------------

Title of Project

*If this research used data related to human beings, Major Professor certifies that USF Institutional Review Board approval was obtained.

Approvals:

Major Professor	Signature	Date
-----------------	-----------	------

Received by College of Education	Signature	Date
----------------------------------	-----------	------

Associate Dean for Graduate Education	Signature	Date
---------------------------------------	-----------	------

College Graduation Certifier	Signature	Date
------------------------------	-----------	------

Routing of Form

- The Major Professor submits the Record of Ed.S. Project/Master's Project Completion form and a hard copy