

ECE Application	n for Design Pro	ject or '	Thesis 595/ 599)			
Note: Special Studies may not duplicate a course which is listed in the Catalog and which is normally offered within a two – year period.					Semester: Grade Mode:	CR/NC	Grade
Name: (La	ist)	(First)		Student ID #:			
Telephone Number:				Email:			
Major:				Minor:			
Units Earned:	Cum. GPA:			Is this an Extended E	Education Course:	Yes	No
Subject	595 599 Units (1-4)		Units (1-4)	Title of Project			
Proposed schedule o	f student/faculty con	ferences					
Basis upon which gra	ade will be assigned:						
APPROVAL SIGN	ATURES:						
1. Instructor:							
2. Graduate Advisor:	:						
3. Department Chair:	:						
4. Approved by Sche	eduler: Check if appr	oved					
5. School Dean:							
D 1							

Procedures:

- 1. Instructor must complete this form and verfy advisor. It will then be routed for remaining signatures.
- 2. Once all signatures are obtained, the form will be sen to the scheduler for processing by adding/drop dealine.

Questions? Email engineering@sonoma.edu