

SCOPE OF RESEARCH ACTIVITY (SRA) FORM

EDU 899: Doctoral Research

DIRECTIONS: Students, in consultation with their faculty supervisor, complete the top portion of the SRA form, retain a copy and upload the original to the EDU 899 Blackboard site no later than the third week of classes.

Student's Name: _____

Semester: _____ Year Admitted to Program: _____

Student ID #: _____ Email Address: _____

Address: _____ City/State/Zip: _____

Mobile Phone: _____ Second Phone: _____

Title of Project (if known): _____

Faculty Supervisor: _____ No. of Credit Hours _____

Description of work to be completed this semester:

Signatures: _____
Student Faculty Supervisor

GRADE SUBMISSION

The faculty supervisor should complete this bottom portion and give it to the student who should upload it to the Blackboard site by Friday of the last week of classes. Students/faculty who need additional time should contact the Director of Doctoral Studies by that date.

_____ Student has met the research goals set for this semester

_____ Student has partially met these goals and should receive an Incomplete

_____ was the last date of contact with the student

_____ Student has not met the research goals set for this semester

Faculty Supervisor's Signature: _____