Directed Research Project

Student Name: _____ I.D. #_____

Student Phone: _____ E-Mail: _____

Date Started: _____ Estimated Date of Completion: _____

Topic of Research Project:

Outline of Research Phase:

Section A (minimum of two required)
_☐_ Develop forms and information necessary for IRB approval
_☐_ Complete statement of the problem and literature reviews
_☐_ Methods (Development of research plan)
_☐_ Stimulus construction

Section B (minimum of two items required)
_☐_ Data collection
_☐_ Data measurement
_☐_ Data analysis

Section C (both items required)
_☐_ Interpretation/Discussion of results
_☐_ Written product

Description of Written Product:

_____ _____ _____ _____

Student Date Graduate Faculty Supervisor Date

_____ _____

Student's Academic Advisor Date