

University of Toronto, Dept. of Psychology – St. George Campus Individual Project Proposal Form

Use this form to submit your Individual Project proposal for approval. Please fill out the form with your supervisor and return it to the *Undergraduate Administrator* in Sidney Smith Hall, room 4014 by the appropriate deadline. Please print clearly.

Note: You cannot add this course yourself on the SWS. **To avoid delay, please make sure you have space on your timetable to be enrolled before handing in this form.**

Student Name: _____

First Name

Surname

Student Number: _____

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Email: _____

Course Code: _____

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Session/Year: _____

(ie., Fall, Fall/Winter, Summer)

Supervisor's Name and Email Address: _____

Individual Short Title: (for transcript – no more than 100 characters, including spaces)

Brief Individual Topic Description: (additional page may be added)

Student's Experimental Duties and Marking Scheme of Project: (additional page may be added)

Prerequisites: I confirm that I have completed *PSY 202H1 – Statistics II* (or equivalent). Yes ___ No ___ If NO, supervisor's initials _____

Student's Statement: I agree to the terms of this proposal. I currently have enough space on my timetable for the department to enrol me in this course. ***I acknowledge that the summer projects are only worth a half-credit.***

Signature _____

Date _____

Supervisor's Statement: I agree to the terms of this proposal and understand that it is my obligation as the supervisor to provide all resources necessary for the completion of this project (including lab space, access to relevant subject populations, and equipment). ***I also certify that the time limit given is a realistic estimation of the length of the project.***

Signature _____

Date _____

For Office Use:

Date Received: _____

Approved by Undergraduate Director: _____ Date: _____

Entered By: _____ Date Entered: _____