

Summer 2023
Dissertation / Thesis / Individual Investigation Program Statement
(Written Plan for Anticipated Progress)

Top section of this form to be completed and signed by the student being advised. Please complete this form prior to registration and obtain the approval signature of the professor who is working with you.

Summer I ☐

Summer II ☐

Summer III ☐

Student's Name: _____ Student KSU ID: _____

Professor's Name: _____

Department/School: _____ Program (if applicable): _____

Description of your project goals or objectives for the Summer Session indicated:

I have enrolled for:	_____ Dissertation I	Course _____	Section _____
	_____ Dissertation II	Course _____	Section _____
	_____ Thesis I	Course _____	Section _____
	_____ Thesis II	Course _____	Section _____
	_____ Individual Investigation	Course _____	Section _____

If the student is not on campus to complete this form in person, the following are acceptable substitutions. Please attach.

Student's Signature _____ Date _____

_____ E-mail _____ Fax _____ Letter _____

This section to be completed & signed by the faculty member if compensation is being requested for Summer.

1/10th workload hour for individual investigation: 0.10 x _____ (# of student credit hours) = _____

Is this course a program requirement (or a substitution for a requirement)? _____ Date registration verified _____

1/3rd (0.333) of a workload hour for thesis/dissertation director or 1/6th (0.166) for co-director _____

Date registration verified _____

*Below, check previous summers for which you were compensated for thesis or dissertation direction for this student:**

Summer '11 _____	Summer '12 _____	Summer '13 _____	Summer '14 _____	Summer '15 _____	Summer '16 _____
Summer '17 _____	Summer '18 _____	Summer '19 _____	Summer '20 _____	Summer '21 _____	Summer '22 _____

***Effective Summer 2005:** The maximum number of summers allowable for compensated dissertation direction is four (4). Normally, the maximum number of summers allowable for compensated thesis direction is two (2).

Faculty Signature _____ Co-Director (if appropriate) _____