

**MS Biology Program**  
**Special Project Acceptance Form**

Step Two

**Student Information**

**Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Semester:** \_\_\_\_\_ **Number of Credits Completed:** \_\_\_\_\_

**Title of Special Project:** \_\_\_\_\_

**Special Project Advisor:** \_\_\_\_\_

**Special Project 2<sup>nd</sup> Reader:** \_\_\_\_\_

**Special Project 3<sup>rd</sup> Reader:** \_\_\_\_\_

**Program Chairperson:** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

(mm/dd/yyyy)

**Final Signed forms should be submitted to the BIOLOGY Graduate  
Program Coordinator one week before the end of the semester**

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**Abstract:** The abstract is to be no more than 250 words in English understandable by a lay reader. The abstract is to indicate the nature of the Special Project, any hypotheses to be tested, and any research methodology and/or statistical procedures used.

**Date of Poster Delivery to the Faculty of the Special Project:** \_\_\_\_\_  
(mm/dd/yyyy)

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*(To be filled out by Special Project Advisor)*

**Advisor/Reader/Chairperson Statement:** We, the undersigned faculty, have reviewed the Special Project entitled:

submitted by\_\_\_\_\_. The final project was delivered to the faculty as a poster presentation on\_\_\_\_\_ (date).

We have also reviewed the content of the project, presentation, and poster. We find the content at a generally accepted level for graduate education at the Masters level, and the overall nature of the proposal suitable as the capstone project for the Masters in Biology.

**Signature of Special Project Advisor:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

(mm/dd/yyyy)

**Signature of Special Project 2<sup>nd</sup> Reader:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

(mm/dd/yyyy)

**Signature of Special Project 3<sup>rd</sup> Reader:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

(mm/dd/yyyy)

**Signature of Graduate Coordinator:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

(mm/dd/yyyy)

**Signature of Department Chairperson:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

(mm/dd/yyyy)