**SYSE 795 Independent Study - Publication Replacement**

College of Engineering/Systems Engineering

Colorado State University

**Instructions**

Student prepares and submits a **written proposal** addressing requirements below and any other relevant information, along with the required application form (page 2). This proposal is intended to serve as a record of what work has already been completed and an agreement between the student and faculty advisor regarding expectations of the student while enrolled (i.e. revisions of work) in order to receive a satisfactory grade.

When complete, submit the proposal and signed form to [sys\_engr\_info@engr.colostate.edu](mailto:sys_engr_info@engr.colostate.edu). The Systems Engineering Program will provide instructions to register. Students must register themselves, pay appropriate tuition, and meet any requirements set by the faculty advisor in the above proposal to receive credit.

Requirements for SYSE 795 Independent Study - Publication Replacement:

* At least two peer‐reviewed journal or conference proceeding publications are required. PhD research must have been performed while enrolled at CSU, and must be either accepted or in print before the application for SYSE 795 can be received. Student must be first author on at least one of the papers submitted for publication.
* The student must provide a list of citations and validating documentation when submitting the Independent Study form.
* Indicate whether each publication has been accepted (completely or with minor revisions) or is already in print.
* Credit cannot be earned for both ENGR 795 and SYSE 795

\*\*Please work with your faculty advisor when planning publications to fulfill this credit\*\*

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**Request Form**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requested Registration Semester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CSU ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ph.D. Advisor(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Publication Titles:

**Attach proposal on a separate sheet. Refer to page 1 for instructions and requirements.**

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Student Signature Date

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Ph.D. Faculty Advisor Signature Date