Submission of Research Plan

Submission Date:　　　.　　　.

Submit to:　　　POS committee Members

Program:　　　＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

Student's ID:　　　＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

Student's Name:　　　＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

Research Project Type: ☐ **Thesis** ☐ **Supervised Research Project**

☐ **Capstone** ☐ **Experiential Learning Project (GMP only)**

Title of the Project: ＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

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1. Timeline

* Please set the schedule of your paper writing and submission plan.

Date	Activities

2. Purpose of the Study

3. Research Question(s)

4. Hypothesis (or Claim)

5. Supporting Argument and Data