Cheriton School of Computer Science University of Waterloo CS 499T Agreement Form

Student (print):	ID #:
Supervisor (print):	Date:
Second reader (print):	Date:
Term course is to be taken:	
Thesis title (tentative):	
Exceptionality of student (indicators that the student is	suitable for a CS 499T course):
Please attach a a detailed thesis proposal, indicating background.	specific short-term goals as well as relevant
By signing the form, you are agreeing to the terms above	ve as well as agreeing that:
 the course work will be comparable in both amore fourth-year course; and the material is not available in a standard course 	
Student:	Date:
	Date:
Instructor:	Date:

Shaded area for internal use only.				
Term in program:	_ CAV:		MAV:	
Other relevant information:				
Advisor:		_ Initials:	Date:	
Action/additional information:				
Decision: Approved \(\square\) Not approved \(\square\) Date:				
Signature of Director of Undergraduate Studies:				