

RTV 4905/4910
Individual Projects Approval Form
MEDIA AND SOCIETY SENIOR PROJECT

Department of Telecommunication, College of Journalism and Communications
Section _____ Semester _____
Name _____ UFID# _____
Telephone _____ (cell ph #) email: _____

The Senior Project allows the Media and Society student to demonstrate mastery of some aspect(s) of their academic career. It may be a "practical" project, such as development of a social media plan or a website for an organization. Such a project will also include a short written description of what was done, why the choices were made, etc. Students who undertake this type of Senior Project will be registered under RTV 4905. The Senior Project may also be a more traditional research paper on a subject of interested related to Media and Society. Students who undertake this type of Senior Project will be registered under RTV 4910. *Determination of the course number for the project will be determined by the Chair of the Department or designee.*

The size and scope of the project will be agreed upon by the student and project supervisor. In general, it is expected that students who receive more credit will carry out a larger, more ambitious project.

The Senior Project must be supervised and evaluated by a faculty member in the College of Journalism and Communications, or another individual approved by the Department Chair or designee.

NATURE OF PROJECT AREA OF STUDY (Be specific):

Credit Hours: _____

Individual Projects are expected to be completed within the semester of registration. A grade of "I" (incomplete) will be given only in unusual circumstances where failure to complete the project was beyond the student's control. Incomplete projects will be graded at the end of the term and the grade will be adjusted to reflect the amount of as well as quality of work.

I have read the above and understand all that is required in doing a Media and Society Senior Projectproject.

Student Signature _____ Date _____

Printed Name of Supervising Instructor _____

E-mail Address _____ Phone Number _____

UF ID # _____

Signature of supervisor instructor: _____

Approved By: _____ Date _____
David H. Ostroff, Ph.D., Dept. Chair