

	SCHOOL OF GRADUATE STUDIES	PLAN OF THE THESIS OR PROJECT
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STUDENT ID NUMBER

8	2	0	-			-			
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NAME (Please **PRINT**): _____ E-mail: _____

Proposed Title of: Thesis Project:

Please give a brief summary of the proposed work.

Attach a written plan for your thesis or project

1. *Purpose and Objectives* of the proposed work
2. Description of how the topic will be examined and workplan
3. Briefly describe the data collection and data analysis
4. Comment on the value and significance of the Thesis or Project

Student's Signature: _____ Date: _____

******Do not write below this line. To be completed by Department or Program Chairperson ******

The Department or Program Chairperson recommends that this thesis or project be directed by:

Committee Chair: _____
 Second Committee Member: _____
 Third Committee Member: _____

I certify:

- That student's plan has been examined and approved by the Department or Program Chairperson of the student's major
- That the investigation or project has merit as a learning experience for the student or as a minor problem in the current research program of the Department or Program.
- That the student has sufficient background to undertake the task.

Approved:

Graduate Committee, Chair: _____ Date: _____
 Department or Program Chairperson: _____ Date: _____

This application must be properly signed before submission to the Graduate School Office for review by Graduate Council.

Approved:

Graduate School Dean: _____ Date: _____