Date

Proposal Approval Form

Student name:		UNID:	
Degree Title:			
Check One:		Thesis	Research Project
Date of Proposal Submi	ssion:		
Topic:			
Data Collection/Manage	ement and timeline:		
Student's proposal:		Accepted	Rejected
Committee Member Sig	natures:		
NameCommittee Chai	Signature		 Date
	' Signature		
			Date
Name	Signature		Date
Name	Signature		
Name	Signature		Date