

## European Studies Capstone Proposal Form

Completed form must be approved by CES before student is able to register.  
Center for European Studies, Mezes 3.306, 512-232-3470

NAME: \_\_\_\_\_ EID : \_\_\_\_\_

AUSTIN ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

When are you planning to graduate?

**Please attach a 1-2 paragraph (minimum) tentative thesis topic.**

Printed name of Supervising Professor \_\_\_\_\_ Date \_\_\_\_\_

Signature of Supervising Professor \_\_\_\_\_

Department of Supervising Professor \_\_\_\_\_

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

Approved by European Studies (signature) : \_\_\_\_\_

For office use only:

Received and verified: \_\_\_\_\_

Cleared for Registration: \_\_\_\_\_

Semester registered: \_\_\_\_\_

Unique number: \_\_\_\_\_

Date of Capstone presentation: \_\_\_\_\_

Second Reader: \_\_\_\_\_

Department of Second Reader: \_\_\_\_\_