

Dissertation Prospectus Approval Form

Student Name: _____ EID: _____

Prospectus Title: _____

Supervising Faculty Member: _____

Participating Faculty: _____

The dissertation prospectus of _____

has been approved by the dissertation committee on _____
(Date)

(Signature of Supervisor)

(Date)

(Signature of Graduate Advisor)

(Date)

Comments:

Please submit this form with the required signatures to the Graduate Coordinator after approval of the prospectus by the dissertation committee.