Master's Thesis Proposal Approval Form DEPARTMENT OF PSYCHOLOGY

Student:	
Title:	
I have agreed to meet with the committee for a proposal approval meeting on: Student Signature: Date: Submit approval form to Thesis Chair prior to start of proposal meeting.	
Required Modifications:	
Thesis Advisor:	Date:
Co-Director (if appropriate):	
Member:	
Member:	
Member:	
Member:	
Submit to Department Services Administ	rator for final signatures.
Area Leader:	Date
Graduate Program Director:	Date:

Rev. 11/22