

**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.**

Committee Action on Proposal:

**Approve with Modifications:** \_\_\_\_\_ **Not Approved/Rescheduled** \_\_\_\_ **Deny:** \_\_\_\_\_

**Required Modifications:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Thesis Advisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Director (if appropriate):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Submit to Graduate Program Secretary for final signatures.**

**Area Leader:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Graduate Program Director:** \_\_\_\_\_ **Date:** \_\_\_\_\_