



Dissertation Pre-Defense Approval Form

Student: Please complete and return form to the Program Coordinator with proper signatures.

Student Name _____ Student ID# U _____

Class: _____

Suggested Date and Date: _____

Title of dissertation _____

Short Abstract Attached.

Committee Approval

We have studied this proposal and certify that the topic is appropriate for a doctoral dissertation and that the research design is developed sufficiently for defending.

1. Committee Advisor/Chair Signature _____ Date _____

2. Committee Member Signature _____ Date _____

3. Committee Member Signature _____ Date _____

Office Use Only

Date Processed _____ By _____