DEPARTMENT OF SOCIOLOGY THESIS PROSPECTUS APPROVAL FORM

Students Name:		
Title of Thesis:		
Brief Description of Thesis:		
Approvals:		
1. Committee Chair Name:		
Signature	Date:	
2. Committee Member Name:		
Signature:	Date:	
3. Committee Member Name:		
Signature:	Date:	
4. Committee Member Name:		
Signature:	Date:	
5. Graduate Director:		
Signature:	Date:	