THESIS PROPOSAL FORM

Please attach this form to the top of your Thesis Proposal (Word document) and submit it to the Liberal Arts Studies Office for approval.

**Date:**

Student’s Name

Advisor’s Name:

Advisor’s Department

Advisor:

\_\_\_Currently Graduate Faculty \_\_\_Will be applying for temporary Graduate Faculty status

Thesis Title:

Signature indicating that the advisor has approved this proposal:

Advisor Date

Signature indicating that the advisor’s chair approves the advisor acting as supervisor:

Chair Date

(Please note that faculty cannot act as advisors in a semester in which they have received a course reduction for research or administration duties.)

Signature of Liberal Arts Studies Program Director:

 **Date**