FORM 8

UNIVERSITY OF LOUISVILLE

**College of Education & Human Development**

**Proposal Approval Form**

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|  |  **Thesis**  |  |  |  |  **Dissertation**  |

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| --- | --- | --- | --- |
| Student Name: |  | Date: |  |
| Department: |  | Major Subject Field: |  |
| Student ID#:: |  | Student e-mail: |  |

# ----Committee Members----

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| --- | --- | --- | --- | --- | --- |
|  | **NAME****(typed or printed)** |  | **DEPARTMENT** |  | **SIGNATURE & DATE** |
|  |  |  |  |  |  |
|  | (Principal Advisor) |  |  |  |  |
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| --- | --- | --- |
| Department Chair |  | Date |
| Associate Dean of Research and Graduate StudiesCollege of Education & Human Development |  | Date |

( ) Approved with no changes required

( ) Pending – revisions being made by Thesis/Dissertation Chair and Candidate

( ) Approved – changes made by Thesis/Dissertation Chair and Candidate

SPRING 2015