JOSÉ RIZAL UNIVERSITY

APPLICATION FOR THESIS/DISSERTATION TOPIC

_____ Trimester, SY 20 _____ - 20 _____ DATE: NAME: DEGREE/MAJOR: PROPOSED TOPIC REMARKS 1. 2. Signature of Adviser Over Printed Name Date Topic No. _____ Approved. See Remarks **ACTION TAKEN:** Revised Topic No. ______ . See Remarks Topic Rejected APPROVED BY: Signature of Dean Over Printed Name/Date