

Transfer credit for _____ hours is recommended. (Subject to approval of the Dean of The

Graduate School). Include on a separate sheet, a list of courses to be transferred and institution(s) attended.

Departmental Requirements: _____

Topic of Thesis: _____

Human/Animal Subjects Review Committee Approval: YES_____ NO_____ N/A_____

Statement of the scope and proposed plan for the thesis:

Signatures of Advisory Committee:

(Committee Chair's Signature)

(Please Print)

(Signature)

(Please Print)

(Signature)

(Please Print)

(Signature)

(Please Print)

(Graduate Coordinator)

(Please Print)

Inquiries regarding progress of the student should be directed to: _____

Changes in this program may be made by filing a *Request for Change in Program of Study* form in The Graduate School. It is the Student's responsibility to obtain approval of major changes in his/her course of study at the time such changes are made. If you have questions call 581-3221.