



Thesis Overview Proposal

Student Name: _____ People Soft #: _____

Email Address: _____

- 1. Student is responsible for scheduling the meeting and making available the appropriate documents.
2. A student must be registered for three credits of PIA 2099 in the term during which the thesis overview meeting is scheduled.
3. The committee will consist of at least three members.
4. A unanimous vote of the master's thesis committee is required for approval of the overview.
5. Once approved, the committee will sign the Thesis Overview Proposal form and submit along with a corrected copy of the overview to the Office of Student Services at the end of the first registered thesis term.

Proposed Master's Thesis title:

Four horizontal lines for writing the proposed thesis title.

Committee Members

Signature Printed Name Date

Chair

Member

Member

Submit this completed form to your Academic Advisor.