

REPORT OF DISSERTATION PROPOSAL MEETING

Department of Educational Psychology

To be submitted to the Graduate Adviser's Office, SZB 504, after completion of the dissertation proposal meeting (give to Graduate Coordinator for files).

Student's Name: _____ Date of Proposal Meeting: _____

Tentative title of dissertation proposal:

On the basis of the student's proposal and discussion between the student and his/her committee, the dissertation proposal was approved: ___YES ___NO

If the proposal was approved, but subject to minor changes or conditions, please state these briefly below:

If the dissertation proposal was not approved, please attach a statement of corrective actions to be taken by the candidate before the next proposal meeting.

Dissertation Supervisor/Co-Supervisor

Dissertation Co-Supervisor