

***Dissertation Research Proposal
Doctor of Philosophy Degree***

Name of Student:

Graduate Program:

Proposed Title of Project:

If you approve the attached Research Proposal, sign your name in the space indicated. The Major Advisor must indicate his/her approval before the student circulates this proposal to the other members of the Advisory Committee.

Name

Signature

Date

Major Advisor

Department Chairman (or Associate Dean for Graduate Programs and Research in Nursing)

Dean, School of Graduate Studies

A copy of the proposal must be submitted to the Dean with this form.