



DISSERTATION PROPOSAL FORM

To be filed with the Graduate College at the same time or soon after the appointment of the Dissertation Advisory Committee (D-3).

Student Information		
Name of Student:	Student ID Number:	Drexel Email Address:
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Dissertation Proposal		
Title of Dissertation/Topic <i>(Please print clearly)</i> :		
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The following are members of the student's Dissertation Advisory Committee:		
1. Chair:	_____	Department: _____
2.	_____	Department: _____
3.	_____	Department: _____
4.	_____	Department: _____
5.	_____	Department: _____
6.	_____	Department: _____

Authorizations/Signatures	
We do hereby affirm that we are approving the submission of the dissertation proposal.	
Chair: _____	Date: _____
Supervising Professor (if not the Chair): _____	Date: _____
Co-Supervising Professor (if applicable): _____	Date: _____
Member: _____	Date: _____
Member: _____	Date: _____
Member: _____	Date: _____
Member: _____	Date: _____
Member: _____	Date: _____
Department Graduate Advisor: _____	Date: _____
Graduate College: _____	Date: _____