

Communication Studies Graduate Program Application for Thesis or Project

To demonstrate adequate preparation and support for a thesis or project, students must complete this form and secure required signatures. Application approval is required prior to development of the Pre-Proposal. Forms must be typed or they will be returned.

Student Name: _____ Date: _____
(Last) (First) (Middle)

I. Committee Membership

Name	Signature	Major Expertise	Dept, if not COMS
1.			
2. (Major Advisor)			
3.			
4.			

(Optional)

II. Brief Description of Thesis/Project Idea (Include proposed methods and research contexts)

III. Brief Discussion of Preparation (Discuss courses taken that support your topic, related research projects completed, skill with proposed methods, the relationships you have developed with your advisor and committee members, etc.)

IV. Tentative Timeline

Pre-Proposal Defense: _____ Prospectus Defense: _____ Thesis Defense: _____
(Semester, Year) (Semester, Year) (Semester, Year)

ADVISOR APPROVAL: By signing below, I indicate that I have met with the student named above for purpose of advising him/her on their thesis or project, and believe they have the necessary preparation, skills, and resources to successfully complete the thesis or project.

Thesis Advisor Name (Typed) Signature Date

GRADUATE COMMITTEE APPROVAL:

Graduate Coordinator Name (Typed) Signature Date