

Thesis Proposal Approval

Name	KSU ID
Email	Phone Number
Program	Advisor
Title:	
The student has completed the oral defense of the proposal on The committee has decided:	
The proposal is accepted	
The proposal is accepted with the following qualifications:	
I understand that it is my responsibility to ensure that all research comhave been put in place before I begin collecting data. I acknowledge the conducting my data collection will negate the use of that data for my the	at failure to secure this permission prior to
Student Signature	Date
Signatures	
Thesis Chair	Date
Program Director	Date
Department Chair	Date
Graduate College Approval	Date