

**THE GRADUATE SCHOOL**

215 Administration Building  
Memphis, TN 38152  
Phone: (901) 678-2531  
FAX: (901) 678-2250

**THESIS OR DISSERTATION PROPOSAL DEFENSE**

Please type or print. When all signatures have been obtained, return original to the Graduate School and retain a copy for the student's file. If animal or human subjects will be used, approval must be obtained before ANY research is undertaken.

Student's Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Major: \_\_\_\_\_ Concentration: \_\_\_\_\_

Degree: .

Today's Date: \_\_\_\_\_

The above student successfully defended his/her thesis/dissertation proposal on: \_\_\_\_\_

The tentative thesis/dissertation title is: \_\_\_\_\_

Necessary human subjects  or animal use  approval (check one) has been obtained

**Attach copy of approval letter.**

Protocol Number: \_\_\_\_\_

**Advisory Committee (Please print or type)**

**Signatures**

\_\_\_\_\_  
Chair, Advisory Committee

\_\_\_\_\_  
Chair, Advisory Committee

\_\_\_\_\_  
Committee Member

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Committee Member

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Committee Member

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College Director of Graduate Studies

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College Director of Graduate Studies

Revised 06/24/04