Student: ____________________________________________________________

Date: _____________________________________________________________

Summary and scope

The student will do the following:

● ________________________________________________________________
● ________________________________________________________________
● ________________________________________________________________
● ________________________________________________________________

Approval Plan (include signatures and dates)

Student __________________________________________________________

Advisor __________________________________________________________

Sponsor (can be advisor) ____________________________________________

Graduate Committee Chair __________________________________________

Verification of Completion (include signature and date)

Sponsor __________________________________________________________

Once this form is completed, please give it to the graduate program specialist.