



## DISSERTATION PROPOSAL APPROVAL FORM

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Tufts ID #: \_\_\_\_\_

Title of Dissertation: \_\_\_\_\_

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We have read and approve the attached proposal subject for dissertation research.

Committee Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Member: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Member: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Member: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Graduate Studies: \_\_\_\_\_ Date: \_\_\_\_\_

Please return to Justina Clayton, Graduate Admissions Coordinator, Room 161.