THESIS ADVISOR REQUEST FORM

You should select a Thesis Advisor (who must be a fulltime member of the Psychology Graduate faculty) prior to the first semester in which you register for Thesis (47.743). Complete this form, including both your signature and the signature of your Thesis Advisor, and return three (3) copies to the Graduate Coordinator.

(Please print or type)

Student's Name ___________________________  Date: __________________

Thesis Advisor's Name ___________________________

Thesis Topic (brief summary) ___________________________

I have discussed initial plans for my Thesis with the faculty member listed above, and that person has agreed to serve as my Thesis Advisor:

Student

(Signature)  (Date)

Thesis Advisor

(Signature)  (Date)

RETURN THREE COPIES TO GRADUATE COORDINATOR

Coordinator approval:

Graduate Coordinator

(Signature)  (Date)
THESIS COMMITTEE REQUEST FORM

In consultation with your Thesis Advisor, you must select two additional people to serve with your Advisor on your Thesis Committee: one must be a fulltime member of the Psychology Department, and the other may be anyone else that you and the first two members agree would be appropriate, provided the individual holds at least a Master's degree or its equivalent in a relevant field. Once you have selected your two additional members, complete this form, including both your signature and the signatures of all members of your Committee, and return three (3) copies to the Graduate Coordinator.

(Please print or type)

Student's Name_________________________________________ Date:________________
Thesis Advisor's Name_________________________________________
Committee Members_________________________________________

I have discussed initial plans for my Thesis with the faculty members listed above, and each of them has agreed to serve on my Thesis Committee:

Student___________________________________________________________ (Signature) (Date)
Thesis Advisor_______________________________________________________ (Signature) (Date)
Committee Member___________________________________________________ (Signature) (Date)
Committee Member___________________________________________________ (Signature) (Date)

RETURN THREE COPIES TO GRADUATE COORDINATOR

Coordinator approval:

Graduate Coordinator______________________________________________ (Signature) (Date)
THESIS PROPOSAL APPROVAL FORM

A Thesis Proposal should be completed by the end of the first semester in which you have registered for Thesis (47.743), or as soon thereafter as possible. You must submit your Thesis Proposal to your Thesis Committee for approval. Once it has been approved, complete this form, including both your signature and the signature of your Thesis Advisor, and return three (3) copies to the Graduate Coordinator.

(Please print or type)

Student's Name__________________________ Date:__________________

Thesis Advisor's Name__________________________

Approved Thesis Topic (title or brief summary)____________________________________

_____________________________________________________________________________

_____________________________________________________________________________

I have completed a written proposal for my Thesis, and this proposal has been approved by my Thesis Committee:

Student____________________________________ (Signature) (Date)

Thesis Advisor____________________________________ (Signature) (Date)

RETURN THREE COPIES TO GRADUATE COORDINATOR

Coordinator approval:

Graduate Coordinator__________________________ (Signature) (Date)
COMPLETED THESIS APPROVAL FORM

Once you have successfully defended your Thesis and obtained approval from your Thesis Committee for the final draft of your Thesis, complete this form, including both your signature and the signatures of all members of your Committee, and return three (3) copies to the Graduate Coordinator.

(Please print or type)

Student's Name ___________________________ Date: ________________

Thesis Advisor's Name __________________________________________

Title of Thesis _________________________________________________

Committee Members _____________________________________________

I have defended my Thesis, and my Thesis Committee has approved and signed the final draft of my Thesis, a library-bound copy of which accompanies this form:

Student _________________________________________________________
(Signature) ______________________________________________________
(Date) __________________________________________________________

Thesis Advisor ___________________________________________________
(Signature) ______________________________________________________
(Date) __________________________________________________________

Committee Member _______________________________________________
(Signature) ______________________________________________________
(Date) __________________________________________________________

Committee Member _______________________________________________
(Signature) ______________________________________________________
(Date) __________________________________________________________

RETURN THREE COPIES TO GRADUATE COORDINATOR

Coordinator approval:

Graduate Coordinator _____________________________________________
(Signature) ______________________________________________________
(Date) __________________________________________________________