



## Thesis/Dissertation Proposal Approval

Name \_\_\_\_\_ KSU ID \_\_\_\_\_  
Email \_\_\_\_\_ Phone Number \_\_\_\_\_  
Program \_\_\_\_\_ Advisor \_\_\_\_\_

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### 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 compliance protocols (human subjects, animal, etc.) have been put in place before I begin collecting data. I acknowledge that failure to secure this permission prior to conducting my data collection will negate the use of that data for my doctoral dissertation.

Candidate Signature \_\_\_\_\_ Date \_\_\_\_\_

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### Signatures

Thesis/Dissertation Chair \_\_\_\_\_ Date \_\_\_\_\_

Program Director \_\_\_\_\_ Date \_\_\_\_\_

Department Chair \_\_\_\_\_ Date \_\_\_\_\_

Graduate Dean \_\_\_\_\_ Date \_\_\_\_\_