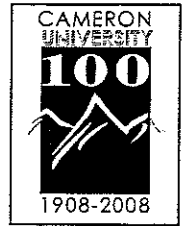




Office of Graduate Studies Cameron University



Thesis Topic and Thesis Advisory Committee Form

Student Name: _____ Student ID #: _____

Degree Program: _____

Area of Concentration: _____

Thesis Title: _____

- An abstract of the proposed thesis project is due in the Office of Graduate Studies within 30 days of submission of this form.
- All research must receive approval from the Cameron University Institutional Review Board to assure compliance with Human Subjects Protection Policies.

Student Signature: _____

Date: _____

Thesis Director	Signature	Date
Thesis Committee Member	Signature	Date
Thesis Committee Member	Signature	Date
Thesis Committee Member	Signature	Date
Thesis Committee Member	Signature	Date
Graduate Advisor	Signature	Date
Coordinator, Office of Graduate Studies		

CC: Department Chair
Student File