

**Computer Science Department
Thesis Proposal**

Students Name: _____ **Signature:** _____

Proposed Dissertation Title:

Please attach a one-page summary of your proposed research

Graduate Program Director: _____ **Date:** _____

Date of examination: _____

Results and recommendations:

Date of re-examination: _____

Results and recommendations:

Research Committee

Name	Department	Approval Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____
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