●University at Albany, State University of New York ●

School of Education

Approval of Dissertation Proposal

Instructions: Complete this form and send original and one (1) copy to the Chair, SOE Academic Council. The original will be returned; the copy will be filed by the Academic Council.

M E M O

TO: Chair, SOE Academic Council

FROM: _____ _____
Department Chair's Name & Signature Department Name

DATE: _____

SUBJECT: Approval of Dissertation Proposal

Student: _____ _____
Name ID Number

Title of Approved Dissertation Proposal: _____

_____

_____

The signatures below certify that the dissertation proposal submitted by the above-named student has met the requirements specified by this department.

As required by the School of Education doctoral regulations, a complete, final copy of the approved dissertation proposal is attached.

Faculty Name & Department		Signature
_____	Chair	_____
_____	Member	_____
_____	Member	_____
_____	Member	_____

Recorded by SOE Academic Council:

_____
Chair, Academic Council

_____
Date