

APPLICATION FOR APPROVAL OF SUBJECT OF THESIS FOR THE MASTER'S DEGREE

Student's Name: _____ **Student's I.D. Number** _____

Proposed Thesis Subject: _____

Department: _____ **Faculty Advisor:** _____

Number of credit hours to be assigned to thesis: _____ **Thesis course for which applicant will register:** _____

Expected date of completion: _____

Please provide a brief abstract describing the topic, research question(s), and the data and methods to be used for the thesis.

Research Protocol Approval (Choose and check A or B or C below)

A. By signature below the student and faculty advisor certify that thesis research involving human subjects, animal subjects, or biohazardous materials has been approved by the applicable University compliance committee(s) as demonstrated by an approval letter: Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), Institutional Biosafety Committee (IBC) or an IRB, IACUC, or IBC that has been designated by the University.

B. By signature below the student and faculty advisor certify and acknowledge that research involving human subjects, animal subjects, or biohazardous materials must be approved in advance by the applicable compliance committee (IRB, IACUC or IBC) and that engaging in such research without approval would constitute misconduct.

C. By signature below the student and faculty advisor certify and acknowledge that this research does not involve human subjects, animal subject, or biohazardous materials and that engaging in such research without advance approval by the applicable compliance committee (IRB, IACUC, or IBC) would constitute misconduct.

Student Signature: _____ **Date** _____

Recommended for approval: _____ **Advisor's Signature** _____ **Date** _____

Graduate Office approval: _____ **Signature** _____ **Date** _____

NOTE: Application bearing the signatures of student and advisor must be submitted to the Office of Graduate Studies.