

# Michigan Technological University CFRES

## Report on MS Thesis Proposal Presentation

This form is required for the following degree: MS Thesis

The thesis proposal presentation must be completed and recorded within 6 years of enrollment.

This form is for use by programs for internal record-keeping and verification of presentation results and should not be sent to the Graduate School.

Provide information about you and your program.

Last Name, First Name, MI: \_\_\_\_\_

M Number (ex. M12345678): \_\_\_\_\_

Graduate Program: \_\_\_\_\_

This certifies that a proposal for thesis on the topic:

\_\_\_\_\_ presented by the above student has been examined and approved by the Advisory Committee (as named on the Advisor and Committee Recommendation Form) as appropriate for a Thesis.

\_\_\_\_\_ Date of thesis proposal presentation.

### Approval Signatures

Please print or type name to the left of the signature.

_____	_____
_____	_____
_____	_____
_____	_____

Obtain administrative approval. Print or type name next to the signature.

Have graduate assessment forms (GLOs) been completed for this candidate?  Yes  No