BASP Dissertation Proposal Approval Form

**Date:**

**Candidate Name:**

**Dissertation Title:**

**Chairperson:**

By signing below, I certify my acceptance of this student’s dissertation proposal as written and submitted with this form. The student has passed his/her thesis proposal defense. He/she may move on with data collection and the completion of the dissertation project.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Signature | Date |
| Committee Chair |  |  |  |
| Committee Member |  |  |  |
| Committee Member |  |  |  |
| Committee Member (if applicable) |  |  |  |

***Please submit a clean copy of the completed Dissertation Proposal to the Training Area Head along with this form.***