DISSERTATION PROPOSAL APPROVAL FORM

Department of Political Science
State University of New York at Buffalo

Name of Candidate: ____________________________________________________________

Date of Dissertation Proposal Defense: _____________________

Title of Dissertation: __________________________________________________________

____________________________________________________________

Action Taken by Committee: _____ 1. Approved

_____ 2. Disapproved

_____ 3. Other Action: _________________________________

________________________________________________

Committee Members: __________________________________________________  (Member)

Print Name                                      Signature

________________________________________________  (Member)

Print Name                                      Signature

________________________________________________  (Member)

Print Name                                      Signature

________________________________________________  (Chair)

Print Name                                      Signature

DGS Approval: ________________________________     ___________

DGS Signature                                      Date