

HILBERT COLLEGE

Graduate Studies

Approval of Graduate Research PROPOSAL Form

Student: _____

Proposal Defense Date: _____

Research Project Title:

Program (circle one): MPA MPA:HA CJA

Research Committee Members (PRINT):

Research Mentor: _____

2nd member _____

3rd Member (optional) _____

_____ FULL APPROVAL

_____ NOT APPROVED

_____ APPROVAL WITH RECOMMENDATIONS

Student Signature

Research Mentor Signature

2nd Member Signature

3rd Mentor Signature (optional)

Department Chair Signature

Please make a copy of the completed form for your records and submit the original to the Center for Graduate & Online Studies.