

SJSU | EdD LEADERSHIP PROGRAM

DISSERTATION PROPOSAL HEARING FORM

Please return this completed form along with a copy of your draft to Maria Munoz by email at Maria.Munoz@sjsu.edu following the Dissertation Proposal meeting.

Student Name: _____

Dissertation Title: _____

Date of Proposal Meeting: _____

Outcome of Proposal Meeting:

Approved

Approved with the following conditions: _____

Resubmit (requires another meeting with the Student and Committee)

S I G N A T U R E S

Student:

Date :

Chair:

Date :

**SJSU Faculty
Member:**

Date :

**Outside Committee
Member:**

Date :

**Fourth Committee
Member:**

Date :

