SJSU | Edd Leadership Program

DISSERTATION PROPOSAL HEARING FORM

Please return this completed form along with a copy of your draft to Tiana Le by email at tiana.le@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:	
Make and man the fellowing containens.	
Resubmit (requires another meeting wi	th the Student and Committee)
SIGNATUR	RES
Student:	Date :
Chair:	Date :
SJSU Faculty Member:	Date :
Outside Committee Member:	Date :
Fourth Committee Member:	Date :

