

# Dissertation Proposal Form

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Date:

WIU ID No.:

Student's name:

The above-named student has submitted and presented to us the following dissertation proposal which we have reviewed and approved:

Dissertation Chair: \_\_\_\_\_

Committee member: \_\_\_\_\_

Committee member: \_\_\_\_\_

Committee member: \_\_\_\_\_

Department Chair: \_\_\_\_\_

College Dean/Assoc. Dean: \_\_\_\_\_

**Return completed form and electronic copy of approved proposal to the School of Graduate Studies.**



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**School of Graduate Studies**  
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