THESIS PROPOSAL APPROVAL FORM

San Diego State University
Department of Anthropology | M.A. Program

Student's Name:_____ Red ID#:_____

Program (check one): ☐M.A. General Anthropology ☐M.A. Applied Anthropology

Program Start Date: _____ Program Expiration Date: _____
Semester/Year Semester/Year

Thesis Title: _____

_____

By signing this form, the thesis committee attests that it has approved the thesis proposal of the above listed student:

Thesis Chair: _____
Print name Signature Date

2nd Member: _____
Print name Signature Date

3rd Member:_____
Print name and dept. Signature Date

SUBMITTED BY:

Student (signature): _____ Date: _____

RECEIVED BY:

Graduate Advisor (signature): _____ Date: _____