

DEPARTMENT OF PSYCHOLOGY  
THE UNIVERSITY OF ARIZONA

DISSERTATION PROPOSAL MEETING

Name of Candidate: \_\_\_\_\_

Date of Dissertation Proposal Meeting: \_\_\_\_\_

Dissertation Title: \_\_\_\_\_  
\_\_\_\_\_

Dissertation Proposal Approved by:

Major Area: \_\_\_\_\_

\_\_\_\_\_  
Chairperson (Sign & Print Name) \_\_\_\_\_ Date

\_\_\_\_\_  
Member (Sign & Print Name) \_\_\_\_\_ Date

\_\_\_\_\_  
Member (Sign & Print Name) \_\_\_\_\_ Date

Minor Area: \_\_\_\_\_

\_\_\_\_\_  
Minor Chairperson (Sign & Print Name) \_\_\_\_\_ Date

\_\_\_\_\_  
Member (Sign & Print Name) \_\_\_\_\_ Date

Please return this form to Graduate Coordinator in room 334 when it is completed.