

Dissertation Proposal Hearing Form

Student Name: _____

Dissertation Title: _____

Date of Proposal Meeting: _____

Outcome of Proposal Meeting:

☐

Approved

☐

Approved with the following conditions and/or changes (please elaborate; use more spaces as needed)

☐

Resubmit (requires another meeting of the Student and Committee)

Signatures

Student: _____

Chair: _____

Committee Member: _____

Outside Committee Member: _____

Please return this form along with a copy of your draft to the Ed.D. Program Office following the Dissertation Proposal meeting.