



Thesis Research Agreement Form

Proposal for Thesis

Instructions: An approved copy of this form and the attached pages outlining the proposal should be filed with each advisory committee member and Department Chair of Kinesiology.

Name: _____ Date filed: _____

Student ID Number: _____

Degree concentration: _____

Tentative thesis title: _____

Expected completion date: _____

Signature of Student

Date

Advisory Committee Approval (minimum of 3 members):

Chairman

Date

Department Chair

Date

Committee Member

Date

Committee Member

Date

Committee Member

Date

Committee Member

Date

On attached pages, provide concise statements of the following:

- | | |
|-----------------------|-------------------|
| I. Tentative Title | IV. Research Need |
| II. Objectives | V. Methodology |
| III. Related Research | VI. References |