



MSc THESIS/PROJECT RESEARCH APPROVAL FORM

Submit copies of the completed form to: (1) Registrar (2) Department Head (3) Major Supervisor(s)

Student Name: _____ **Student I.D.:** _____

Address: _____

Department: _____

Thesis **Project**

Title: _____

Research Advisory Committee

Name	Title	Approval	Signature/Date
Major Supervisor(s)			
1.		Yes/No	
2.		Yes/No	
Committee			
1.		Yes/No	
2.		Yes/No	
3.		Yes/No	
4.		Yes/No	

Period of Research: _____

Statement of Research Problem: *(Attach additional information; include Name and Student ID on all pages)*

Study Objectives: *(Attach additional information; include Name and Student ID on all pages)*

Tentative Methodology and Study Plan: *(Attach additional information; include Name and Student ID on all pages)*

Anticipated Major Challenges and Plan to Overcome Them: *(Attach additional information; include Name and Student ID on all pages)*

Major Milestone and Tentative Research Schedule *(Gantt Chart may be provided)*

Student Signature: _____ **Date:** _____

By signing above, I certify that the information provided in my MSc Thesis/Project Research Approval Form is accurate. I acknowledge that knowingly providing false information is considered grounds for dismissal from the University.