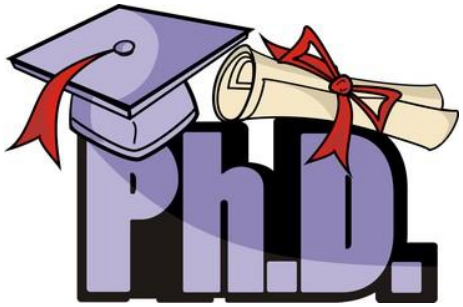

FORM 4

2nd YEAR PROJECT PROPOSAL FORM

NOTE: Attach a copy of proposal

_____	_____	_____
(print student's name)	**(signature)**	**(date)**

_____

(print practicum proposal title)

_____	_____	_____
(print Faculty Supervisor's name)	**(signature)**	**(date)**

_____	_____	_____
(print Guidance Committee Chair's name)	**(signature)**	**(date)**

APPROVED:

_____	_____
(Director, Information and Media)	**(date)**

Information and Media
304 Communication Arts & Science Bldg.
East Lansing, MI 48824
(517)432-1526

Cc: Student
Student File