

Approval of Project Proposal
School of Journalism

Student: _____ Date: _____

Working Title of Project: _____

Project Chair: _____

Approved: _____
Signature

2nd Reader: _____

Approved: _____
Signature

3rd Reader: _____

Approved: _____
Signature

Proposed Starting Date: _____

Proposed Completion Date: _____

*Please attached abstract of project proposal.