Thesis/Project Proposal for Theatre Arts Doctoral Degree

ID No.

Name

Adviser(s)

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| **Major** Field Examiners(minimum required: three examiners;The adviser and one other must be designated reviewers) |  | **Supporting Program** field or **Minor** Examiner(minimum required: one examiner who must be a designated reviewer) |
|  | Rev | Chr |  |  | Rev | Chr |
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|  | Rev | Chr |  |  | Rev | Chr |

Doctoral thesis/project working title:

Adviser Name: Signature:

DGS signature/date:

Name: ID:

In 250 words or less, describe the research to be undertaken and the methods to be employed. Please limit to space provided below or to one side of a separate sheet.