



SCHOOL OF KINESIOLOGY
OFFICE OF GRADUATE
STUDENT AFFAIRS
UNIVERSITY OF MICHIGAN

School of Kinesiology
University of Michigan

Dissertation Proposal Approval

Student _____ Student I.D. # _____
 Last Name First Name

Proposal Title:

Signatures of the Dissertation Committee Members below indicate they have read the dissertation proposal and attended the oral presentation.

Members	Signature	Date	Pass	Pass with Revisions	Repeat Proposal
Chair			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pass = The student passes the dissertation proposal with no changes to the proposal
Pass with Revisions = The student passes the dissertation proposal with changes to the proposal document
Repeat Proposal = The student must repeat the presentation following changes to the proposal document

Associate Dean of Graduate Affairs Signature **Date**

All committee members must indicate a Pass or Pass with Revisions for the student to have successfully passed the dissertation proposal. Following a pass, the Dissertation Proposal Approval form and the final dissertation proposal document, including any requested revisions, should be submitted to the Office of Graduate Affairs. If a student has to repeat the proposal, turn in the form indicating that decision.

Candidate: Please review your transcript and confirm the composition of your Dissertation Committee. If it is not listed, please contact Charlene Ruloff immediately.