APPROVAL FORM FOR DOCTORAL DISSERTATION PROPOSAL

Department of Human Development and Family Studies

Name (Last, First, Mid-	dle)			PID Number
Major Advisor			Research Director	
Major			Minor(s)	
Dissertation Credits				
TENTATIVE TITLE:				
Proposed Schedule:				
Pilot Study				
completed;	to be done;	none neces	ssary	
Date to begin research			Estimated date of co	mpletion
Approval Date				
ADVISORY COMMITT	EE			
Major Professor			Date	_
Research Director (if other than Major Professor)		or)	Date	_
Major Area Representative			Date	_
Major Area Representative			Date	_
Major Area Representative			Date	_
Approved by: Department	ent Chairman			Date