Boston University Graduate School of Arts & Sciences

705 Commonwealth Avenue Boston, Massachusetts 02215



Dissertation Prospectus Approval Form

Please submit the completed form to the Graduate School of Arts and Sciences or via email to grsrec@bu.edu . All submitted forms must include all signatures.		
Name:		Program: Please select
BU ID #:		Advisor:
Date Prospectus was submitted to department:		
Proposed title of dissertation:		
Dissertation Committee Approval		
1 st Reader		
and n	Name	Department/Program
2 nd Reader	Name	Department/Program
3 rd Reader		
(if applicable)	Name	Department/Program or outside institution
4 th Reader	Nama	Deporture ant/Due common ou cutei de institution
(if applicable)	INAIIIE	Department/Program or outside institution
Required Signatures		
Student		Date
Department Chair/Program Director or Director of Graduate Studies Date		