UNIVERSITY OF OREGON | School of Journalism and Communication

Thesis Proposal Approval Form

Student Name: _____ UO ID: _____

Degree Program: _____

Working Title of the Thesis:

_____

Committee Approval

Chairperson (print name)	Signature	Date
Committee Member (print name)	Signature	Date
Committee Member (print name)	Signature	Date
Committee Member (print name)	Signature	Date

*Return this form to the SOJC Graduate Programs Office at SOJCgrad@uoregon.edu
**After submitting this form, you must also complete the Pre-Authorization Form each term you plan to enroll in JCOM 503 Thesis credits. The Graduate Programs Office will notify you when you are able to register in DuckWeb.