

UNIVERSITY OF CHICAGO

Department of Economics

THESIS PROPOSAL APPROVAL FORM

This form must be provided to the Thesis Chairman by the student at the beginning of the Thesis Proposal Seminar.

STUDENT'S NAME: _____

Date of Thesis Seminar: _____

Name of Workshop (if Applicable): _____

Time: _____

Place: _____

(to be arranged by the Office of Graduate Student Affairs)

Thesis Title: _____

At the conclusion of the Thesis Proposal Seminar, this form must be completed and signed by the chairman of the thesis committee in a manner reflecting the outcome of the faculty vote and returned to the Office of Graduate Student Affairs.

APPROVED:

Signature _____ Date: _____

Printed Name _____

Chairman

NOT YET APPROVED:

Signature _____ Date: _____

Printed Name _____

Chairman