



MPHIL THESIS PROPOSAL DEFENSE

Last Name: _____ First Name: _____
(Print Clearly) (Print Clearly)

Thesis proposal title: _____

The committee agrees that the student has successfully presented their thesis proposal and can move forward in completing their Master's degree program at College of the Atlantic.

Committee Chair:

Last Name: _____ First Name: _____
(Print Clearly) (Print Clearly)

Signature **Date:** _____

Committee member:

Last Name: _____ First Name: _____
(Print Clearly) (Print Clearly)

Signature **Date:** _____

Last Name: _____ First Name: _____
(Print Clearly) (Print Clearly)

Signature **Date:** _____

This signed document should be turned into the Registrar's Office.