

# CDSP MASTER OF THEOLOGICAL STUDIES

## THESIS PROPOSAL FORM

NAME: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TENTATIVE THESIS TITLE: \_\_\_\_\_

**This form must be submitted to the CDSP Dean's Office after your committee approves your proposal. Complete the scheduling worksheet in the box below to plan your defense schedule.**

### SCHEDULING WORKSHEET

Anticipated semester of graduation: \_\_\_\_\_

Thesis filing/exam deadline (per CDSP Academic Calendar): \_\_\_\_\_

Proposed date of thesis defense or oral exam: \_\_\_\_\_

Human Subjects Protocol approved (before beginning research): \_\_\_\_\_

Thesis Proposal submitted (attached) (see Academic Handbook): \_\_\_\_\_

### PROPOSED THESIS COMMITTEE

MTS students are required to have **two members** on the thesis committee. The thesis advisor must be a member of the CDSP faculty. The thesis advisor plus one faculty reader comprises a thesis committee. The second reader may be from outside CDSP; if the second reader is not a member of the faculty at the GTU or a GTU member school, the Dean of Academic Affairs must approve the reader.

Thesis Advisor	Signature Approving Proposal	Date
----------------	------------------------------	------

Second Reader (School of Affiliation)	Signature Approving Proposal	Date
---------------------------------------	------------------------------	------

Student Signature	Date
-------------------	------

Signature of Approval, CDSP Academic Dean	Date
---	------