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.

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<th>Thesis Advisor</th>
<th>Signature Approving Proposal</th>
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<th>Second Reader (School of Affiliation)</th>
<th>Signature Approving Proposal</th>
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Student Signature __________________________ Date __________

Signature of Approval, CDSP Academic Dean __________________________ Date __________

Rev. 02.05.20