



COLLEGE OF COMMUNICATION
ACCEPTANCE OF THESIS PROPOSAL

This is to confirm that on _____
(Month) (Day) (Year)

Mr./Ms. _____

successfully defended his/her thesis proposal. The tentative title of the thesis is:

(Signature of each member required):

Committee Chair: _____

Committee Member: _____

Committee Member: _____

Committee Member: _____

Approval: _____

Graduate Coordinator for M.A. Program
Telecommunication and Film Department

cc: Student
Student's File