

____ Copy of Gradforms 7 & 8 attached

SCRIPPS COLLEGE OF COMMUNICATION

REPORT ON THE APPROVAL OF THE DISSERTATION PROPOSAL

Name _____ PID# _____

is seeking the Doctor of Philosophy degree in the School of _____ Major Code _____

PROPOSED Title of Dissertation:

_____ Date Proposal **Approved**

REQUIRED SIGNATURES

TYPED NAMES

_____, Advisor

_____, Dean's Representative

Associate Director for Graduate Studies

Date

This report must be signed and filed by the Associate Director for Grad Studies, as soon as the **FINAL** approval is given to the dissertation proposal.

_____	Date SCHOOL sent original to the Associate Dean, College of Communication, Schoonover 121.
_____	Date SCHOOL sent copy to the Student.
_____	Date SCHOOL sent copy to the Advisor.