

**Auburn University
Department of Psychology**

Thesis/Dissertation Proposal Defense Form

Please complete this form and return it to the Graduate Coordinator in the Psychology Department.

Student's Name: _____

Date of Proposal Meeting: _____

Type of Proposal (check one): _____ Thesis _____ Dissertation

Title of proposed thesis/dissertation:

The undersigned advisory committee met on the date above to consider this student's proposal and agree that he/she has successfully defended that proposal.

Committee Members:

Name (and department if other than Psychology)

Print

Signature

_____ (Chair)
