

REQUEST FOR APPROVAL OF THESIS ADVISOR

Student: \_\_\_\_\_ is working on  
his/her thesis research \_\_\_\_\_ on a trial project  
with me during the \_\_\_\_\_ semester.

Advisor Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Research/Thesis Topic:

Approved by: \_\_\_\_\_  
Director of Graduate Studies

Date: \_\_\_\_\_