Department of Sociology

Name:		ID#	
Major: Sociology	Sociology/Anthropology _	Graduation Date: Decemb	ber
May	()	(year) (year)	
Grade Point Aisbrage: (in major*) (overa	all*)	
Thesis Option:			
Thesis Advisors:			Thesis Title (if
	known)		Thesis
Тор	ic		
			The
remainder is to be comp	pleted by the faculty. Please sign	and date on appropriate line for a	pproval of
proposal and upon com	pletion of project.		
	Prop	oosal Final Thesis	
Undergraduate Chair		D	Departmental
Chair			
Graduate Coursework	Option:		
	Course # Instructors Approval U	Jndergraduate Director Approval	

Student must obtain a B or better in each course

Note: Student and instructor should each retain one copy of this form, original should be returned to Stephanie DeCaluwe in Coffey Hall 424.