

**Eligibility**

The student must be in good standing, be registered for at least one graduate-level credit during the semester the proposal is presented to the student's committee (including summer) and have an error-free iPOS on file. Consult the [SOS Graduate Handbook](#) or email [SOSGradAdvising@asu.edu](mailto:SOSGradAdvising@asu.edu) for details on the policies.

**Instructions**

**Part I:** The student completes Part I and arranges the proposal meeting with the committee.

**Part II:** The student lists proposal title, date and committee names. The committee will sign and check the box if the proposal is approved or not.

**Part III (only if applicable):** The committee chair lists any additional work if needed. The chair signs and dates this section once the student has fulfilled the specified requirements.

**Submission:** The original, signed form is to be submitted to the front SOS advising desk. You also need to submit the written proposal. Bring a hardcopy to SOS advising or email a PDF version to [SOSGradAdvising@asu.edu](mailto:SOSGradAdvising@asu.edu).

Part I: Student Information			
Student Name (Last, First, MI)			10 Digit ASU ID#
Degree Program: <input type="checkbox"/> MA <input type="checkbox"/> MS			Anticipated Term & Year of Graduation: <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall
Choose your final paper requirement (scientific paper is not an option for students who started before fall 2014):		<input type="checkbox"/> Thesis OR <input type="checkbox"/> Scientific Paper	
Part II: Proposal Date/ Committee Information & Approval			
Proposal Date (MM/DD/YY Format):		(list date the proposal presented to committee)	
Proposal Title			
Please Type Names of Committee	Signatures	Approval?	
		Yes	No
Chair / Co-chair		<input type="checkbox"/>	<input type="checkbox"/>
Chair / Co-chair		<input type="checkbox"/>	<input type="checkbox"/>
Member		<input type="checkbox"/>	<input type="checkbox"/>
Member		<input type="checkbox"/>	<input type="checkbox"/>
Member		<input type="checkbox"/>	<input type="checkbox"/>
Member		<input type="checkbox"/>	<input type="checkbox"/>
Part III: Additional Requirements (use only if applicable)			
Committee Chair/ Co-chair Signature(s):			Date (MM/DD/YY)