

Prospectus Approval Form

Please return this form, with a copy of your approved prospectus attached, to the Department Office.

Student: _____

Year of Matriculation at Tulane: _____

Degree Pursued: _____

Date of Prospectus Approval: _____

Proposed Thesis Title:

Thesis Committee:

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

* _____

Signature: _____ Date: _____

*This denotes a member of the committee from outside Tulane University.

Chair of EES Graduate Committee

Signature: _____ Date: _____