



THE GEORGE
WASHINGTON
UNIVERSITY
WASHINGTON DC

DEPARTMENT OF: _____

THESIS TOPIC (MASTER'S)

The student named below intends to work toward the following Master's Thesis.

Departmental Advisor: _____ Date: _____

Student's name: _____ **GWID:** _____

Degree: _____ First semester in program: _____

Thesis title: _____

Thesis Committee:

| | Name | Signature |
|--------------|-------|-----------|
| Director: | _____ | _____ |
| Co-Director: | _____ | _____ |
| Reader: | _____ | _____ |

Time Frame:

Intended semester of completion: _____

APPROVAL: _____