PROPOSING A NON-THESIS MASTER'S PROGRAM

Sample Signature Page

Title of Degree to be Conferred:

Proposed Date of Initiation of the New-Option Program:

Name of Academic Unit Offering the Degree:

Campus:

Signature of Department Head Name of Department

Signature of Academic Dean Name of College/School

Approval Recommended by the Graduate Council (if required)

Final Approval:

Dean of the Graduate School

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Date

Date

Date

Date