



### Dissertation Prospectus Approval Form

Please submit the completed form to the Graduate School of Arts and Sciences or via email to [grsrec@bu.edu](mailto:grsrec@bu.edu). All submitted forms must include all signatures.

Name: \_\_\_\_\_ Program: Please select  
BU ID #: \_\_\_\_\_ Advisor: \_\_\_\_\_

Date Prospectus was submitted to department: \_\_\_\_\_

Proposed title of dissertation:  
\_\_\_\_\_  
\_\_\_\_\_

### Dissertation Committee Approval

1 <sup>st</sup> Reader	_____
Name	Department/Program
2 <sup>nd</sup> Reader	_____
Name	Department/Program
3 <sup>rd</sup> Reader	_____
(if applicable) Name	Department/Program or outside institution
4 <sup>th</sup> Reader	_____
(if applicable) Name	Department/Program or outside institution

### Required Signatures

Student	_____	Date	_____
Department Chair/Program Director or Director of Graduate Studies	_____	Date	_____