

UNIVERSITY OF DAYTON  
DEPARTMENT OF COMMUNICATION

## Prospectus Approval Form

This form should be signed by the advisor and committee members prior to enrollment in COM 599. Please submit a copy to the Director of Graduate Studies.

**Student's Name:** \_\_\_\_\_

**Date of Prospectus (mm/dd/yyyy):** \_\_\_\_\_

**Anticipated Date of Graduation (Month Year):** \_\_\_\_\_

**Thesis Title:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Thesis Advisor:** \_\_\_\_\_

**Committee Member:** \_\_\_\_\_

**Committee Member:** \_\_\_\_\_

**Committee Member:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_

**Director of Graduate Studies:** \_\_\_\_\_