

PERU STATE COLLEGE GRADUATE PROGRAMS

Acceptance of Thesis/Action Research Project

Name:	<input type="text"/>	Student ID:	<input type="text"/>
Address:	<input type="text"/>	E-mail Address:	<input type="text"/>
City:	<input type="text"/>	State:	<input type="text"/>
Zip:	<input type="text"/>	Phone:	<input type="text"/>

- Degree: Education – Curriculum and Instruction
 Organizational Management – Entrepreneurial and Economic Development

Faculty Mentor:

Final Title of Thesis/Action Research Project (*Attach Abstract*):

I understand that this acceptance is for the above described project only. Any changes to the above described project must be approved in advance. It is the responsibility of the graduate student to meet any final requirements for the Graduate Program Thesis/Action Research Project in a timely manner and within the semester enrolled. Failure to do so may result in termination of the graduate thesis/action research project or assignment of grade of "F".

Graduate Student Signature

Date

The Thesis/Action Research Project has been completed in an acceptable manner.

Faculty Mentor Signature

Date

Dean of Graduate Programs

Date