

**Thesis Committee Designation Form**  
Department of Criminal Justice

Student \_\_\_\_\_ Student-ID # \_\_\_\_\_

Proposed Thesis Title \_\_\_\_\_  
\_\_\_\_\_

Anticipated Graduation Semester and Year \_\_\_\_\_

Synopsis of Proposed Thesis (brief outline of proposed research and methodology):

Thesis Chair* _____	
Committee Member* _____	
Committee Member* _____	
Student Signature _____	Date _____
Graduate Advisor Approval _____	Date _____
<p>*You are not required to obtain the signatures of the thesis chair and committee members on this form. However, it is expected that you have asked the chair and members to serve on your committee and they have agreed <u>before</u> submitting this form.</p>	