

## Appendix N

### **Graduate School Thesis and Dissertation Instructions and Checklists**

Theses, Ed.S. projects, and dissertations usually represent a culmination of major research, which significantly contributes to existing scholarship within a given academic field. These projects consist of a written interpretation of facts and opinions gained through critical reading as well as independent research. Because a thesis, Ed.S. project or dissertation is considered a student's original contribution to his or her professional field, it should be written in a credible literary style and present meaningful conclusions.

All questions concerning the content of the thesis, Ed.S. project or dissertation and its organization should be resolved with the student's advisor. Students should become thoroughly familiar with both the guidelines required by The Graduate School as well as the Department of Graduate Psychology.

For full instructions, requirements and general information necessary for preparing and submitting a thesis, Ed.S. project or dissertation, students should go to The Graduate School's current on-line Thesis and Dissertation Manual which can be found at: <http://www.jmu.edu/cgapp/thesisdissmanual04-05/pdf>.



COLLEGE OF GRADUATE AND PROFESSIONAL PROGRAMS

## Approval of a Thesis or Dissertation Committee

Full Legal Name: \_\_\_\_\_

PeopleSoft ID: \_\_\_\_\_ Email Address: \_\_\_\_\_

Anticipated Date of Graduation: Month \_\_\_\_\_ Year \_\_\_\_\_

Program Major: \_\_\_\_\_ Concentration(s) (if any): \_\_\_\_\_

Anticipated Degree:  AUD  Ed.S.  M.A.  M.A.T.  M.B.A.  M.Ed.  M.F.A.  M.M.  M.O.T.  
 M.P.A.  M.P.A.S.  M.P.H.  M.S.  M.S.Ed.  M.S.N.  Ph.D.  Psy.D.

Project being completed:  Research Project  Thesis  Dissertation  Other

Brief Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Adviser: \_\_\_\_\_

(Print name)

Each committee must consist of a chair and two other graduate faculty members. Additional faculty may be included. If a recommended member of the committee is not a graduate faculty member, please indicate his/her area of specialization and qualifications for inclusion. Attach additional sheets if necessary.

Committee Chair: \_\_\_\_\_ Academic Unit: \_\_\_\_\_

(Print name)

Committee (print all names):

Name: \_\_\_\_\_ Academic Unit: \_\_\_\_\_

Graduate Faculty Member?  Yes  No \_\_\_\_\_

Name: \_\_\_\_\_ Academic Unit: \_\_\_\_\_

Graduate Faculty Member?  Yes  No \_\_\_\_\_

Name: \_\_\_\_\_ Academic Unit: \_\_\_\_\_

Graduate Faculty Member?  Yes  No \_\_\_\_\_

Name: \_\_\_\_\_ Academic Unit: \_\_\_\_\_

Graduate Faculty Member?  Yes  No \_\_\_\_\_

Name: \_\_\_\_\_ Academic Unit: \_\_\_\_\_

Graduate Faculty Member?  Yes  No \_\_\_\_\_

### Provide the following signatures for Committee Approval:

\_\_\_\_\_  
Student Date Adviser Date

\_\_\_\_\_  
Thesis/Dissertation Chair Date Academic Unit Head Date

\_\_\_\_\_  
Program Coordinator Date Dean of CGAPP Date