APPROVAL OF DOCTORAL PROSPECTUS

Marshall University College of Education and Professional Development

Date:		
	Student ID Number	
Doctoral Student's Name		
Email Address		
Mailing Address: Street		
City	StateZip	
The above named student, who is a r	natriculant for the Ed.D. degree	with a major of
	and an area of en	mphasis of
	<u>,</u> has s	ubmitted the
dissertation prospectus: (type title bel	ow)	
	Working Title	
The Committee has approved the pro	ospectus.	
	Member	Date
	Member	Date
	Member	Date
	External Member	Date
	CommitteeChair	
	CommitteeChan	Date
Doctoral Student	Date	
Program Director	Date	
Doctoral Program Coordinator	 Date	
Dean, COEPD	 Date	