

## **MASTER'S THESIS TOPIC** and **COMMITTEE MEMBERSHIP**

Please type all required information. Do not handwrite. This form must be submitted along with the Program of Study form. See <u>https://www.ou.edu/gradcollege</u> for deadlines.

Student Name:

OU ID:

Academic Unit:

Proposed Thesis Topic:

## **Proposed Thesis Committee Membership:**

The committee must consist of a chair and at least two other members of the graduate faculty. All members must have a current appointment appearing on the <u>Graduate Faculty List</u> at <u>https://www.ou.edu/gradcollege</u>. This list also provides department, status, and expiration date for each appointment. For more information about thesis committee membership requirements and changes, see the *Graduate College Bulletin*.

	Name (should be typed or printed)	<b>Signature</b> (must be <u>origina</u> l)	Department/Status (e.g., Economics/M3)	Expiration Date
Chair:				
Members:				
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## I understand that:

- The thesis must be my original work, and any included material that has been produced by or in collaboration with others must be cited as such.
- If my thesis may involve human subjects research and/or vertebrate animal research, I must contact the OU Institutional Review Board (IRB) and/or Institutional Animal Care and Use Committee (IACUC) and receive all necessary approvals <u>before</u> conducting these types of research.
- If my thesis may involve information protected from dissemination by applicable law or contract, or intellectual property which may potentially be patentable, I should discuss this with my committee chair <u>as early as possible</u> in the research process.
- My thesis may not contain material that requires permanent restriction from publication.
- I am responsible for reviewing the Graduate College *Thesis/Dissertation Instruction Packet*.

I hereby request that the Graduate College approve my proposed thesis topic and committee membership.

Student Signature

Date

I have reviewed the above-named student's proposed thesis topic and committee membership and I recommend approval.

Printed Name of Graduate Liaison

Date