

Department of Atmospheric, Oceanic, and Earth Sciences

4400 University Drive, Fairfax, Virginia 22030

http://aoes.gmu.edu

### MASTERS THESIS COMMITTEE and PROPOSAL DEFENSE

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|  |  |  |
|  |  | **DATE** |
|  |  |  |
| **STUDENT NAME** |  | **G#** |
|  |  |  |
| **TELEPHONE** |  | **GMU E-MAIL** |
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| **PROPOSED THESIS TITLE** |  |  |

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The undersigned committee has reviewed the attached proposal, and agrees that the student above has prepared an acceptable plan for conducting Master’s Thesis research. We approve that plan and will support the ongoing Thesis preparation process. The student can register for 3 credits of 799 using the individualized Section Form.

##### **Thesis Committee Membership**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Name (printed) |  | Affiliation |  | Signature |
| Member |  |  |  |  |  |
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| Member |  |  |  |  |  |
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| Member |  |  |  |  |  |
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| Chair |  |  |  |  |  |

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| Scheduled or Tentative Thesis Defense Date |  |

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| --- | --- | --- | --- |
|  | Signature |  | Date |
| Student |  |  |  |
|  |  |  |  |
| Committee Chair |  |  |  |
|  |  |  |  |
| Graduate Coordinator |  |  |  |
|  |  |  |  |
| COS Dean |  |  |  |