

**THE GRADUATE SCHOOL
SHIPPENSBURG UNIVERSITY
Shippensburg, PA 17257-2299**

**ARRANGEMENTS FOR COMPLETING THE THESIS/DISSERTATION REQUIREMENTS
FOR MASTER/DOCTORAL DEGREES**

To be completed by the CANDIDATE: Each Master's Thesis candidate must complete Thesis I and II. Each Doctoral Dissertation candidate must complete appropriate Dissertation courses (e.g., Seminar, Dissertation I, and Dissertation II) depending on their program requirements.

NAME: _____ S.U. ID NUMBER: _____

DEGREE: _____ FIELD OF SPECIALIZATION: _____

NOTE: "Q" grades must be submitted for Thesis/Dissertation Research until the work is completed. Only when the Thesis/Dissertation is completed can a regular letter grade be recorded. Under no circumstances can a regular letter grade be submitted unless the Thesis/Dissertation is completed and signed by all members of the Thesis/Dissertation committee.

MASTER'S THESIS: Thesis must be submitted to the Registrar's Office in final approved form within one calendar year from the date registered for Thesis II. Otherwise, the student must complete registration for Thesis II again and pay the appropriate course fees.

DOCTORAL DISSERTATION: Candidates must be actively enrolled in a semester when they are completing dissertation activities. If the dissertation is not completed at the end of term in which the candidate has registered for Dissertation II, the candidate must register for an additional dissertation course each semester until the dissertation is completed, signed by all committee members and submitted to the Registrar's Office.

Tentative date expect to receive Master/Doctoral Degree: _____ Date of registration for Thesis/Dissertation: _____

Thesis/Dissertation Title: _____

Thesis/Dissertation Committee Chair *University affiliation if other than Shippensburg University*

Thesis/Dissertation Committee Member *Affiliation if other than Shippensburg University*

Thesis/Dissertation Committee Member *Affiliation if other than Shippensburg University*

Thesis/Dissertation Committee Member (OPTIONAL) *Affiliation if other than Shippensburg University*

I have arranged for an initial meeting with my advisor and the committee members listed above? YES NO Date: _____

CANDIDATE SIGNATURE: _____ DATE: _____

To be completed by Department OR Program Chairperson: I recommend the approval of the above Committee. All committee members have been contacted by me and have agreed to serve on the Committee.

SIGNATURE: _____ DATE: _____

Department/Program Chairperson

Please schedule the student named above for the thesis/dissertation credit indicated in the semester or term stated below:

Thesis I or Dissertation I (Code #) _____ Year _____ Fall, Spring, Summer: Term A Term B, Winter

Thesis II or Dissertation II (Code #) _____ Year _____ Fall, Spring, Summer: Term A Term B, Winter

To be completed by Graduate Office: (A copy of this form will be returned to the Department, Dept. Chair, and the Thesis/Dissertation Chair.)

The above committee is approved as recommended. SIGNATURE: _____ Date: _____

Director of the Graduate School