



Thesis Proposal Approval Form (T-1 Form)

Please return this form and any attachments to the Office of Graduate Studies at gradstudies@wsu.edu.

Student's Name: _____ WSU ID: _____

Date of Meeting: _____

Working Title of Thesis: _____

Decision of Thesis Advisory Committee Regarding Proposal (check one)

- _____ Approved as presented
_____ Approved subject to additions, corrections and/or modifications as per the attached*
_____ Approved subject to additions, corrections and/or modifications as per the attached*, subject to review and approval of the Thesis Advisory Committee
_____ Approval denied

*Please attach a synopsis of any additions, corrections and/or modifications with this form, and give a copy to the student.

Table with 3 columns: Advisory Committee, Signatures, Date. Includes a row for the Chair and four empty rows for other members.

Nature of Research Proposed

Will the thesis involve the collection of data from human subjects and/or the use of archival data collected from human subjects? (check one)

- _____ Yes (In this case, the student must obtain WSU Institutional Review Board (IRB) approval before beginning the data collection process and/or initiating the analysis of archival data. See reverse side for details.)
_____ No

**Information for Thesis Master Students Who Collect
Original Data for Thesis Study**

Before you begin any data collection, an approved IRB approval confirmation must be submitted to the College of Education Office of Graduate Studies. Please either attach a copy to this document or email a copy to gradstudies@wsu.edu. In keeping with WSU Graduate School policy, failure to comply strictly with IRB requirements regarding the use of human subjects will result in your thesis not being accepted for meeting final graduate requirements. In addition, disciplinary action by Washington State University and/or legal action by the Federal Office of Human Research Protection may be taken.

Student Signature _____
(Signature indicates acknowledgement of IRB policy noted above)

Date _____

For COE Office of Graduate Studies use only

Date approved IRB Form filed with COE Office of Graduate Studies _____

Approved Form filed by _____
Signature of Graduate Studies Officer

_____ Date
