

**UNITED STATES SPORTS ACADEMY
DISSERTATION PROPOSAL AND COMMITTEE APPROVAL FORM**

Student Name _____ **Date** _____
Please Print Month/Day/Year

Degree: Select One:
Doctor of Education (Ed.D.) _____
Doctor of Education (Ed.D.) with Emphasis in Sports Medicine, Olympism, Sports
Coaching, Sports Theory, or Sports Fitness & Health _____

Proposed Title (should be 12 words or less):

Thesis/Dissertation Fee Submitted _____

Dissertation Committee	Name (Please print)
Committee chair Email address:	_____ _____ _____
Committee Member Email address:	_____ _____ _____
Committee Member Email address:	_____ _____ _____

Approvals:
Committee chair
 Name (Please print) _____
 Signature _____

Director of Doctoral Studies
 Name (Please print) _____
 Signature _____

Chief Academic Officer
 Name (Please print) _____
 Signature _____

Check Appropriate Action	Copies Given To (check when completed)
Approved _____	Committee Chair _____
Approved Conditionally _____	Registrar _____
Not Approved _____	Student File _____
	Academic Affairs _____