

LAKEHEAD UNIVERSITY
DEPARTMENT OF WOMEN'S STUDIES

COLLABORATIVE MASTER'S PROGRAM
THESIS/RESEARCH PROJECT/COURSE WORK PROPOSAL APPROVAL FORM

Instructions: Please complete the required information on the top of the sheet. When the student's proposal has been approved by the Home Unit, please have the Supervisor sign and date and then forward it along with a copy of the Proposal to the Women's Studies Graduate Coordinator for review.

Name of Student: _____ Home Unit: _____

Name of Supervisor: _____

Thesis/Research Project/Coursework - 2 papers to be approved from other courses beyond WS 5101:

Home Unit Approval: _____ Date: _____
(Signature: Thesis/Project/Coursework Supervisor)

Department of Women's Studies Approval:

Does this proposal fulfill requirements for the Women's Studies Collaborative Program?

Approved: _____ Approved with Revisions: _____ Revise & Resubmit: _____
(Detail required revisions below)

Comments/Suggestions: (These will be directed to the supervisor to convey to the student)

Signature of Core Women's Studies Representative

Date