

Ph.D. Program in Clinical Psychology  
Southern Methodist University

DISSERTATION PROPOSAL MEETING

Note: This form should be completed at the end of each proposal defense and turned in to the Director of Graduate Studies.

Student: \_\_\_\_\_

Title: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_ This project is approved as presented.

OR

\_\_\_ The following issues were raised during the proposal meeting and need to be addressed (continue on back if necessary):

Note: Committee members will also need to sign off on a letter indicating how each of these issues will be addressed. This letter should be presented to committee members as soon as possible following the proposal meeting.

Committee Members:

\_\_\_\_\_  
(chair)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_