DEPAUL UNIVERSITY

COLLEGE OF EDUCATION

Applied Capstone Approval

CANDIDATE INFORMATION:					
Student Name:		DePaul	DePaul ID#		
Address:					
Primary Phone:			e:		
Email:	Sec	condary Email:			
Concentration: Curriculum Studies					
TITLE OF DISSERTATION:					
DATE OF ORAL EXAMINATION: Dissertation Approval Form Regulations: 1. Must have all of the dissertation chair and complete to the dissertation committed.	committee:	members' sign			
This section to be completed by the Dissertation Co	mmittee:				
Signature of Captone Advisor Print name:	Date	Approved	Approved with Revisions	Not Approved	
Specifications for Revision (Attach additional comm	nents if need	led):			

Please return completed form to the Doctoral Program Office (COE 346). Candidates are responsible for submitting final dissertation materials to the Doctoral Program Office and to ProQuest. Submission to the Doctoral Program Office and ProQuest are graduation requirements.