

**GRADUATE COMMITTEE AND OPTION APPROVAL FORM  
CENTRAL WASHINGTON UNIVERSITY  
(Submit the original)**

Note: This form is to be completed as soon as the student has formed a committee and selected an option from the list below. Submit original to the School of Graduate Studies and Research.

Student Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Student ID \_\_\_\_\_  
 \_\_\_\_\_ CWU Email: \_\_\_\_\_

Check option:	Indicate credits to be received for the thesis or option:
<input type="checkbox"/> Written Exam*	_____
<input type="checkbox"/> Project	Course No. _____ Title _____ Credits _____
<input type="checkbox"/> Creative Project	_____
<input type="checkbox"/> Studio Project	Course No. _____ Title _____ Credits _____
<input type="checkbox"/> Portfolio Review	_____
<input type="checkbox"/> Thesis (standard)	Style Manual for Thesis/Project
<input type="checkbox"/> Thesis (journal-ready)	

\*Students taking written exam option may omit items 1-5 below.

1. Proposed Title (and title of targeted journal if appropriate):  
 \_\_\_\_\_

2. Purpose of Study:  
 \_\_\_\_\_

3. Scope of Study:  
 \_\_\_\_\_

4. Procedure to be used:  
 \_\_\_\_\_

5. Does the procedure involve collection of data obtained from  
 Human Subjects (including use of surveys)? ..... Yes\*\*  No   
 Use of Animals? ..... Yes\*\*  No

\*\* If yes, your procedures must be approved in writing by the Human Subjects Committee or the Animal Care and Use Committee before you initiate your research.

\_\_\_\_\_  
 Committee Chair (**typed or printed**)                      Committee Chair (**signature**)                      Date

\_\_\_\_\_  
 Committee Member (**typed or printed**)                      Committee Member (**signature**)                      Date

\_\_\_\_\_  
 Committee Member (**typed or printed**)                      Committee Member (**signature**)                      Date

**Approved by:**                      **Approved by:**

\_\_\_\_\_  
 Dept Chair/Designee\* (**signature**)Date                      Dean of Graduate Studies                      Date

\*in the case of interdisciplinary programs, this form should be signed by the relevant Program Director/Co-Director AND relevant Dept chair. In cases where they cannot agree to sign for approval, the approval will be made or denied by the relevant interdisciplinary program advisory committee. GS&R 10/2021