



Major Research Paper Supervisory Committee
(Please print clearly or type)



Student _____ ID# _____

Program PUBLIC POLICY ADMINISTRATION AND LAW

Degree MPPAL Date _____

Student's Signature _____

Proposed Research Topic: _____

Graduate Program Director Recommendation:

I recommend to the Faculty of Graduate Studies approval of the MRP Supervisory Committee for the above student.

Supervisory Committee <i>(Please print/type)</i>	Name	Date	Supervisory Committee Member's Signature
Supervisor:			
Second Reader: (Optional)			
External Reader: (Optional)			

Graduate Program Director Signature

Date

Note: It is mandatory that a copy of the final version of the MRP be submitted to the Graduate Program Assistant upon completion. This must be submitted in hard copy to be retained by the office.