



Department of Civil Engineering
Masters Project and Report Proposal

Name: _____ U-Number: _____

Current Mailing Address: _____

Email Address: _____

Area of Concentration (if applicable): _____

Today's Date: _____

The above student successfully defended his/her project proposal on: _____

The tentative project title is: _____

COMMITTEE APPROVALS: (please print & sign your name)

Committee Chair: _____

Member: _____

Member: _____

Member: _____

Member: _____

DEPARTMENTAL APPROVALS:

Graduate Coordinator: _____ Date: _____

Department Chair: _____ Date: _____