



STD DISSERTATION PROPOSAL

*The Proposal must be submitted and approved at the conclusion of DT951.
When the proposal is ready, present this form to your dissertation director.*

PLEASE TYPE OR PRINT ALL INFORMATION

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|--|-------|-----------|------|--|
| NAME OF CANDIDATE | | | | |
| TITLE OF DISSERTATION | | | | |
| Approvals | | | | |
| <input type="checkbox"/> Director | NAME | SIGNATURE | DATE | |
| <input type="checkbox"/> Second Reader | NAME | SIGNATURE | DATE | |
| <input type="checkbox"/> Third Reader | NAME | SIGNATURE | DATE | |
| <input type="checkbox"/> President of the Faculty | NAME | SIGNATURE | DATE | |
| Required attachment | | | | |
| Proposal (<i>make certain it includes the following:</i>) <ul style="list-style-type: none"><input type="checkbox"/> Dissertation title<input type="checkbox"/> Thesis statement (claim), and explanation of its importance<input type="checkbox"/> Status quaestionis (review of literature)<input type="checkbox"/> Description of proposed methodology<input type="checkbox"/> Assumptions of this study<input type="checkbox"/> Obstacles to such a study<input type="checkbox"/> Research timeline<input type="checkbox"/> Bibliography<ul style="list-style-type: none"><input type="checkbox"/> Primary sources, sources in original languages / Latin sources, etc.<input type="checkbox"/> Secondary sources | | | | |
| Dissertation completion deadline (<i>not later than 5 years from proposal approval date</i>) | MONTH | DAY | YEAR | |
| CANDIDATE'S SIGNATURE | | | DATE | |

COPIES OF THIS DOCUMENT ARE TO BE FILED WITH:

☐ Registrar

☐ President of the Pontifical Faculty