

# DISSERTATION PROPOSAL (D-P) FORM

## STATE UNIVERSITY OF NEW YORK AT BUFFALO

### Department of Psychology

This is to certify that the following faculty members have agreed to serve on the doctoral committee for \_\_\_\_\_.

The members have read the dissertation proposal and held a committee meeting on \_\_\_\_\_ at which time they unanimously approved the proposal.

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**(TITLE OF PROPOSAL)**

Major Advisor \_\_\_\_\_ Date \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Accepted by: \_\_\_\_\_ Date \_\_\_\_\_

Director of Graduate Studies