



ADVISER SELECTION FORM

Date Submitted: _____

Name	<i>Last Name</i>	<i>First Name</i>	<i>MI</i>
Program Major			
Thesis Title			
Abstract	<p><i>Short description in less than 150 words</i></p>		

Rate the...	Performance Rating: 4 = Exceptional; 3 = Proficient; 2 = Satisfactory; 1 = Limited/Flawed	4	3	2	1
PROPOSAL IN GENERAL	• Title				
	• Abstract				
	• The candidate's verbal ability to discuss the proposed topic				
	• Attached supporting journal articles				
	Performance Rating: 4 = Exceptional; 3 = Proficient; 2 = Satisfactory; 1 = Limited/Flawed				

To Be filled by the Research Methods Professor	Potential Advisers		
	Adviser 1: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Not at this time
	Adviser 2: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Not at this time
	Adviser 3: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Not at this time
	<i>Program Chairperson's final recommendation</i>		