**NOBTS Doctor of Education Program**

**Research Proposal Report**

Student: \_\_\_\_\_\_\_ Date:

NOBTS-ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposal Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Decision: Passed Deferred

Faculty Mentor (Signature):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EDOC Committee 2nd Member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Director of Doctor of Education Program Date

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Associate Dean of Research Doctoral Programs Date

**Instructions:** The Chairperson signs and lists other guidance committee member. Submit one or both proposal evaluation forms with this form to the Doctor of Education office. The EdD Office will advance the proposal to the Associate Dean of Research Doctoral Programs for final admission to the Prospectus Development workshop.

**Enclose 2 copies of the approved Research Proposal.**





FOR REGISTRAR’S OFFICE

Please add the following to the student=s transcript:

Course Semester Credit Grade

Hours

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Covered under cap: Yes No