

NOBTS Doctor of Education Program

Research Proposal Report

Student: _____ Date: _____

NOBTS-ID #: _____ Major: _____

Proposal Title: _____

Decision: ____ Passed ____ Deferred

Faculty Supervisor
(Signature): _____

EDOC Committee 2nd Member: _____

Director of Doctor of Education Program Date

Instructions: The Faculty Supervisor signs and lists other guidance committee member. Submit one or both proposal evaluation forms with this form to the Doctor of Education office.

FOR REGISTRAR'S OFFICE

Please add the following to the student=s transcript:

Course	Semester	Credit Hours	Grade
_____	_____	_____	_____

Covered under cap: Yes No