

**Media Communications Department  
Bachelor (UG) Thesis Proposal Form**

**Who Should Use This Form?**

UG Media Communications students who are submitting a proposal to their thesis supervisor.

**Important Information**

If your proposal is approved, you will be registered as a thesis-writing student. You will have two consecutive terms to complete the thesis.

**How to Submit**

Submit this completed and signed form to your supervisor when you submit your proposal.

For due dates, please review the departmental website's resources section.

<b>Student Name</b>		<b>Student ID</b>	
<b>Student E-Mail</b>			
<b>Major</b>			
<b>Requested Registration Period</b> (two consecutive terms)	Fall 1	Fall 2	Spring 1   Spring 2   Summer
<b>Thesis Supervisor</b>		<b>Second Reader</b>	

<b>Title</b>
<b>Primary Research Question(s) and/or Hypotheses</b>
<b>Brief Statement of Anticipated Outcomes</b>
<b>Abstract (250 words or fewer)</b>

**Your Proposal**

I hereby certify that my proposal includes the following sections. *(Your supervisor may ask you to submit more than what is listed below.)*

1. Summary of the research proposal (250 words or fewer)
2. Background on your research topic and an explanation of why it is worthy of further inquiry
3. Academic and practical objectives of your proposed research
4. Research question(s) and/or hypotheses
5. If applicable, approval gained or underway from the IRB
6. Any potential use of university equipment
7. Review of the literature that will be used (with a list of references at the end of the proposal)
8. Identify the methodology. *How will the research be conducted, and why? Which data will be used?* (sample size, sampling method, study design)
9. Detailed timeline of research activities, milestones, and agreed-upon deadlines
10. Brief analysis of the limits and uncertainties involved in the research.

**Institutional Review Board**

My project requires IRB approval.	Yes	No
If yes, I have received IRB approval from St. Louis.	Yes	No
If yes, I have submitted proof of IRB approval to the department coordinator.	Yes	No

**Guidelines and Due Dates**

**I have read the Departmental Thesis Guidelines and am aware of the deadline(s) for my proposal.**

<b>Student Signature</b>		Date:
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**Signatures**

<b>Thesis Supervisor</b>		Date:
<b>Second Reader (If Determined)</b>		Date:
<b>Department Head</b>		Date:

**Office Use Only**

Received by Dep. <input type="checkbox"/>	Proposal On File <input type="checkbox"/>	IRB Clearance <input type="checkbox"/>	Student Informed <input type="checkbox"/>
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