DEPARTMENT OF FOLKLORE and ETHNOMUSICOCLOGY
M.A. THESIS PROPOSAL FORM

Please prepare one copy for each member of your thesis committee and one for the department’s file. Please try to confine your proposal to these two pages.

NAME _______________________________________

DATE _________________________

TENTATIVE THESIS TITLE:

AIM AND SCOPE OF THE THESIS (the nature of the problem – be brief):

THE METHODS TO BE USED:
PRESENT STATE OF SCHOLARSHIP RELATIVE TO THIS TOPIC (Mention here some particular people who have written on this topic, or adjacent to it, and the extent of their findings or views. City, if pertinent, which previous research conclusions are to be checked.):

THE DISTINCTIVE CONTRIBUTION YOU HOPE TO MAKE:

NAME OF THE ADVISOR WITH WHOM YOU HAVE DISCUSSED THIS TOPIC:
M.A. THESIS APPROVAL FORM

DEPARTMENT OF FOLKLORE and ETHNOMUSICOLOGY, Bloomington, Indiana

Student _______________________________

Date of Enrollment _______________________

Proposed thesis title or topic

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Committee

NAME               DEPARTMENT                 SIGNATURE

________________________  ________________________  ________________________
(Chair)

________________________  ________________________  ________________________

________________________  ________________________  ________________________

Date form was submitted __________________

Approved ____________________________________________     _________________

Director of Graduate Studies        Date
ORAL EXAMINATION

DATE _______________

GRADE: Pass (   )   GRADE for F850: ________
Pass with Revisions (   )
Fail (   )

Nature of Revisions:

M.A. THESIS COMMITTEE

__________________________________
__________________________________
__________________________________
__________________________________
__________________________________

All members of the M.A. Committee will sign the thesis acceptance pages, to be held until any revisions are completed. The committee chair will then sign below to certify completion of any revisions.

The thesis (including any revisions) is complete.

__________________________________  Date ___________
Chair

The thesis has been turned in:

__________________________________  Date ___________
Graduate Recorder

Paperwork for the M.A. degree will not be filed until all of the above are completed.