

**Capstone Proposal Approval
Educational Leadership, Ed.D.**

Advanced Graduate Studies
College of Education

Name: _____ PID: _____

Program/Code: Doctor of Educational Leadership / 6752

Title of Capstone Project (may be tentative, but should be accurate and descriptive):

Anticipated date of completion:

Federal and University regulations require that all proposed research projects involving human subjects be reviewed and approved by the University Committee on Research Involving Human Subjects (UCRIHS) and appropriate IRB.

Will your research involve human subjects: Yes No

If yes, when UCRIHS approved your proposal: (MM/DD/YY)

I, the undersigned student, understand that the research cannot begin until the UCRIHS grants its approval.

Please do not file this form with the Graduate Records Office until the proposal and supporting application materials have been approved by UCRIHS. Date may be handwritten.

Required signatures:

Student/Date: _____

Capstone Director/Chairperson/Date: _____
Name: _____

Guidance Committee Members: _____
Name: _____
Name: _____
Name: _____
Name: _____
Name: _____

Department Chairperson/Date: _____
Marilyn Amey, Chair

Program Secretary: Return signed original to the Grad Records Office, 204 Erickson Hall