TORONTO SCHOOL OF THEOLOGY
DOCTOR OF MINISTRY OFFICE

DMIN THESIS PROPOSAL APPROVAL

Section 1 – To be completed by the STUDENT or SUPERVISOR

Name	**Student Number**
College ☐ EM ☐ KN ☐ RG ☐ SM ☐ TR ☐ WY	**U of T email**

Section 2 – To be completed by the SUPERVISOR

Title of Thesis:	
Thesis Proposal Readers	
Supervisor	
Faculty Member	
CLG Member	
MBG Member	
Does the thesis proposal involve research with human subjects?	☐ **YES** ☐ **NO**
If "YES", the student will require approval from the U of T Ethics Review Boards prior to commencing research.	

Section 3 – APPROVAL OF THESIS PROPOSAL, to be completed by the SUPERVISOR

The thesis proposal has been:	☐ APPROVED ☐ APPROVED (with minor corrections) *Please use additional sheet, if necessary*
	☐ NOT APPROVED
If "Not "Approved," a revised proposal will be re-submitted within three months, no later than	Date
Thesis Supervisor's Signature	**Date**

NOTE: The thesis supervisor is responsible for the distribution of this form

ORIGINAL of this form with thesis proposal
- TST DMin Office

COPY of this form:
- College Registrar
- Student

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