

Completion of Thesis Proposal Defense

Big Data Analytics (SDSU) Master's Program

Last Name First MI Red ID

Thesis Title

Date of Proposal Defense (Month, Day, Year)

Committee	Name	Signature
Committee Chair		
Second Member		
Third Member		
Additional Member (if applicable)		

*****IDEALLY, YOU SHOULD HAVE YOUR COMMITTEE NOMINATION FORM TURNED IN BEFORE COMPLETING YOUR PROPOSAL DEFENSE*****