**OFFICE OF THE RESEARCH, DEVELOPMENT AND EXTENSION**

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College

\_\_Thesis Outline

\_\_Thesis Manuscript

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| --- | --- | --- | --- |
| Name: |  | Date: |  |
| Course: |  | Major Field: |  |
| Date of Examination: |  | O.R. No.: |  |
| Place: |  | Date Paid:: |  |

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| Title of Study: |

(Note for Outline and Final Defense, each committee member, Institute Coordinator and the office of Director for Research should be furnished with copy of the final draft of the thesis at least 5 working days prior to the scheduled date of examination).

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| **Designation** | **Name** | **Signature** | **Date** |
| 1. Student
 |  |  |  |
| 1. Adviser
 |  |  |  |
| 1. Data Processor / Statistician
 |  |  |  |
| **EXAMINING COMMITTEE** |
| 1. Chairperson
 |  |  |  |
| 1. Member
 |  |  |  |
| 1. Member
 |  |  |  |
| **RECOMMENDING APPROVAL** |
| 7. Department Chairperson |  |  |  |
| 8. College Research Coordinator |  |  |  |
| **APPROVAL** |
| 9. College Dean |  |  |  |