

**DEPARTMENT OF PSYCHOLOGY**  
**1<sup>st</sup> Year Research Project (PSYC 270ABC)**  
**Paper Proposal Approval**

*Sign-Off Sheet*

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**STUDENT NAME:**

\_\_\_\_\_  
PRINT

\_\_\_\_\_  
DATE

**By signing below, my faculty advisor and one additional faculty member accept my paper proposal for my 1<sup>st</sup> year research project.**

\_\_\_\_\_  
PRINT (Faculty Advisor)

\_\_\_\_\_  
SIGN

\_\_\_\_\_  
PRINT (Faculty Member)

\_\_\_\_\_  
SIGN