# Thesis Option Request and Recommendation Form

**Purpose**: To increase the likelihood of a positive outcome for students who desire the thesis option, the School of Social Work requires that all students requesting the thesis option obtain approval by the School’s Curriculum Committee. See the SCSW thesis policy for more details.

The student shall submit this completed form and all supporting documentation to the Director, MSW program By September 1st of the fall semester preceding anticipated graduation. The Director, MSW program will review and submit to the Chair of the Curriculum Committee for review and vote. Earlier submission is encouraged. Students in the 2- or 3-year programs are particularly encouraged to submit this during the preceding spring semester.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_

Advanced Standing 2‐Year Program 3‐Year Program

# I am submitting the following, consistent with the SCSW policy:

# This form, signed by me and my proposed chair (SCSW doctoral-level faculty member)

# Preliminary thesis timeline (see policy for content to address)

# Concept paper (2 pages maximum; see policy for content to address)

# Evidence of strong writing skills (see policy for acceptable forms of evidence)

# Evidence of an A in SCWK 40703/52703 (Research and Technology I) or equivalent from another institution. (See policy for acceptable forms of evidence)

* 1. Note: Students with a B in this class can request the thesis option but must address why this does not pose a barrier to successful thesis completion within the concept paper.

**Student self-assessment:**

One a scale of 1 – 5 with one being strongly disagree and five being strongly agree please respond to the below questions:

I am self‐directed

I am able to effectively manage time and multiple demands

During the year that I work on my thesis, I have planned such that my schedule permits me to regularly schedule blocks of writing time in addition to meeting other demands such as course work, field work, employment, and other life responsibilities.

Name

Signature

Date

**Statement from proposed thesis chair**

I have agreed to chair the above student’s MSW thesis. I am confident in the student’s ability to successfully complete a thesis based on (check all hat apply):

\_\_\_\_\_\_\_ Prior classroom teaching, List class(es): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ Other prior academic interactions, Summarize: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ Review of the information within this packet

\_\_\_\_\_\_ Other, please describe (in detail if none above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

Signature

Date