



SYNTHESIS PAPER/PROJECT PROPOSAL

M.T.S.

Master of Theological Studies

Student's Name: _____

Title of Paper/Project: _____

Area of Concentration: _____

READERS' SIGNATURES:

Director/Academic Advisor: _____ Date: _____

Reader: _____ Date: _____

DESCRIPTION (This description should include a brief statement of the questions you are attempting to answer, how you intend to go about it, the methodology, and an indication of the availability of sources. Use the reverse side if necessary.)

Approval of JST Associate Dean

Date

SUBMIT THIS COMPLETED FORM TO THE JST ASSOCIATE DEAN'S OFFICE.

A copy will be returned to you.