

# Kainan University, School of Tourism and Transportation

## Thesis ( Professional Practice Report ) Proposal Review Application

Date: (YYYY/MM/DD)

Group	<input type="checkbox"/> Tourism and Leisure <input type="checkbox"/> Aviation Transportation and Logistics	Program	<input type="checkbox"/> Master's program <input type="checkbox"/> Master's on-job program	
Name		Student ID No.		
Number of credits earned	Number of credits			
Review by graduate office	<input type="checkbox"/> student has met minimum credit requirements <input type="checkbox"/> student has not met minimum credit requirements  Signature by staff at graduate office:			
Thesis title	Chinese :  English :			
	In the proposed reviewers, the advisor is required to provide a list of at least three internal committee members. The Group Director shall select two from the list.			
	Name	Title	Agree to review (signature)	Selected by Group Director
Pre-invited reviewers				
Pre-invited reviewers				
Pre-invited reviewers				
Group Director	(signature)		Advisor	(signature)
Executive Director	(signature)			

Note :

Please submit your application two weeks prior to the review, and after obtaining the approval of your advising professor, kindly submit this application form to the department office.