

**SUBJECT FOR MASTER'S OR LICENTIATE THESIS**

THE CATHOLIC UNIVERSITY OF AMERICA

School of Philosophy

**(PLEASE TYPE OR PRINT LEGIBLY)**

I, \_\_\_\_\_, wish to submit the following subject for investigation:  
(NAME)

\_\_\_\_\_

Please check one:

Master of Arts degree

Licentiate degree

\_\_\_\_\_  
Candidate's Signature .

\_\_\_\_\_  
Date

**Approved by Faculty:**

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Date

\_\_\_\_\_  
Major Professor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean

\_\_\_\_\_  
Date

**This form is to be made out in duplicate and brought to the Office of the Dean, 100 Aquinas Hall.**

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