

**DNP Scholarly Project Proposal Approval**

Student Name: \_\_\_\_\_ UMID #: \_\_\_\_\_

Title of Proposal: \_\_\_\_\_

Brief Description of Proposed Project: \_\_\_\_\_

**Committee Members:**

Chair: \_\_\_\_\_

Member: \_\_\_\_\_

Member: \_\_\_\_\_

Member (Optional): \_\_\_\_\_

**Approvals:**

By signing I confirm that the student's proposal for a scholarly project has been successful defended and approved.

Chairperson, Scholarly Project Committee: \_\_\_\_\_

Date: \_\_\_\_\_

*This completed form should be submitted to the Director of the DNP Program.*