

**HAMLIN UNIVERSITY
GRADUATE SCHOOL OF LIBERAL STUDIES
POETRY CAPSTONE REGISTRATION: MFA THESIS II**

Return completed form to the Graduate School of Liberal Studies

- **by fax** to 651-523-2490
- **by mail** to Hamline University, Graduate School of Liberal Studies, MS-A1730, 1536 Hewitt Ave, St. Paul MN 55104-1248
- **in person** to the GLS office at 1500 Englewood Avenue

Student is responsible for obtaining required signatures.
Contact GLS at 651-523-2047 with questions.

please type or print

Hamline ID/Social Security Number: _____

Name: _____
Last First Middle

Address: _____
Street City State Zip + 4

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Home Phone: (_____) Work Phone: (_____)

Please register me for the following:

GLS 8492 – Thesis II (4 credits) Fall Spring Summer Year: _____

Proposed Title: _____

Name of Committee Chair: _____

Signature of Committee Chair: _____ Date: _____

Name of Vice Chair: _____

Name of Administrative Advisor: _____

I acknowledge that I have received consent from the individuals above to serve as my Capstone committee. They have agreed to collaborate on this project.

Student signature (required): _____ Date: _____