



**Countering Weapons of Mass Destruction Graduate Fellowship
Declaration of Selection of the Thesis or Oral Examination/Research Project Option**

This form must be completed and approved no later than the end of the second semester of the program

Name:	M#
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I hereby declare my intention to **(select one)**:

Write an 80-100-page thesis on a WMD-related topic approved by the Countering Weapons of Mass Destruction (CWMD) Graduate Fellowship Program Director and my Missouri State University (MSU) thesis committee. I understand that:

- The thesis must be wholly my original work;
- The thesis must be fully referenced in the academic style as required by MSU;
- *The thesis cannot include any material whatsoever written for any other purpose, including but not limited to work done for any other course taken at MSU or elsewhere;*
- I am responsible to form a thesis committee consisting of a first, second, and third reader, all of whom are members of the MSU graduate faculty;
- I must observe all deadlines established by the Department of Defense and Strategic Studies relative to the timely submission of the thesis.

Take an oral examination and write a 30-page research project (i.e. 30 pages in addition to prefatory material paginated in Roman numerals and any appendices) on a WMD-related topic approved by the CWMD Graduate Fellowship Program Director. I understand that:

- The research project must be wholly my original work;
- I am responsible to form an oral examination board consisting of the Director, Countering WMD Graduate Fellowship Program or his delegate, and two other MSU graduate faculty members;
- I am required to take a two- to three-hour oral examination administered by the board;
- I must submit to the oral examination board both the research project and two other papers written in connection with the CWMD Graduate Fellowship Program, as evidence of my scholarship;
- I must observe all deadlines established by the Department of Defense and Strategic Studies relative to the timely submission of the research project and the completion of the oral examination.

I understand that this declaration constitutes a commitment that can be changed only under demonstrably extraordinary circumstances and with the permission of the CWMD Graduate Fellowship Program Director and my MSU faculty advisor, who is

(fill in name) _____.

Signature _____ Date _____

Approvals Section

The above named student's declaration is acknowledged and approved.

MSU Faculty Advisor:

Signature _____ Date _____

CWMD Graduate Fellowship Program Director:

Signature _____ Date _____