



Graduate Theological Foundation
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DOCTORAL PROJECT SIGN OFF

Student Name: _____
(Name as you wish it to appear on your diploma)

Mailing Address: _____

Degree Program: _____

Year of acceptance: _____

Project Title:

Project Consultant: _____

Institutional Affiliation: _____

Title/position: _____

The Foundation does not maintain archival copies of student projects after they have been reviewed. Projects cannot be returned to students. Students are encouraged to keep a copy of their project for their records.

This form must accompany the doctoral project when it is submitted. The doctoral project must be submitted in hard copy to the Foundation's general address, or by email attachment to the Office of the Registrar (registrar@gtfeducation.org). The student will be notified by mail upon evaluation of the project by the faculty of the Graduate Theological Foundation.