



Penn Arts & Sciences

College of Liberal and Professional Studies • Master of Liberal Arts Program

This certifies that I have agreed to serve on the Capstone Project Committee of:

Student's Name

Student Social Security Number: XXX - XX - _____

Topic of Capstone Project:

Signatures of Capstone Project Committee Members:

Primary Reader

Date

Email Address

Secondary Reader

Date

Email Address

Note: Mail this form to the Master of Liberal Arts Program, University of PA, 3440 Market Street, Suite 100, Philadelphia, PA 19104-3335. This form and the proposal will be placed in the student's file and is available for review by the student upon request.