

Student Name	CWID	Date (mm/dd/yyyy)

Title of Proposal	Program (Check 1.)			
	EDOL	<input type="checkbox"/>	PGLC	<input type="checkbox"/>
	ELAP	<input type="checkbox"/>	EDLT	<input type="checkbox"/>

50 Word Abstract

Insert number of pages and sources. For full guidelines, please refer to "Dissertation Guidelines for Page Count and Cited Sources."				Proposal Minimum Page Requirements			Literature Review Parameters		
					EdD	PhD		EdD	PhD
Number of Sources		# of pages in Ch. 1		Ch. 1	15	20	Theoretical Framework	Single	Multiple
Share the Number of Sources in your reference list. The Total Page Count does NOT include preliminary pages, references, or appendices.		# of pages in Ch. 2		Ch. 2	30	40	Scope of Lit. Review	Narrow/targeted	Comprehensive
		# of pages in Ch. 3		Ch. 3	12	12	Minimum # of Sources	105	140
		Total Page Count		Total	57	72	Scholarly/Trade Ratio	70:30	90:10
If there is any variation from the required page counts and/or number of sources, your chair should explain why below. ↓							Primary/Secondary Ratio	90:10	95:5

Date of Preliminary Oral (mm/dd/yyyy)		Zoom Meeting ID	
Time (allow two hours)		Check the box to indicate a physical location if applicable.	
		WLA	<input type="checkbox"/>
		Irvine	<input type="checkbox"/>
		Other	<input type="checkbox"/>

Required: Indicate below the term and year you completed each of the following courses.

PhD Students, list the term (Fall/Spring/Summer) and year that you completed the following courses.

EGLC 766 (Quantitative Methods)		EGLC 734 (Statistics)		PGLC 734 (Adv. Statistics)		EGLC 767 (Qualitative Methods)		PGLC 767 (Adv. Qualitative Methods)	
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EdD Students, list the term (Fall/Spring/Summer) and year that you completed the following courses.

EDD 766 (Quantitative Methods)		EDD 734 (Statistics)		EDD 767 (Qualitative Methods)	
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Required Signatures

Chair Name	Chair Signature	Date
Committee Member Name	Committee Member Signature	Date
Committee Member Name	Committee Member Signature	Date
Student Name	Student Signature	Date

Note: The student is responsible for submitting this completed form with signatures and an electronic copy of their dissertation proposal to gsepeddissertations@pepperdine.edu at least **two weeks prior** to the preliminary oral date in order for it to be officially scheduled.

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Program Director Name	Program Director Signature	Date