

**STONY BROOK UNIVERSITY
DEPARTMENT OF ENGLISH**

REQUEST FOR EN ROUTE MASTER'S THESIS

Name _____ SBID# _____

Thesis Director: _____

Second Reader: _____

Description of Thesis: Include title and abstract

Approved ___ Not Approved ___ Thesis Director _____ Date _____

Approved ___ Not Approved ___ Second Reader _____ Date _____

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