LINCOLN UNIVERSITY 401 FIFTEENTH STREET, OAKLAND, CA 94612

BA 399 - MBA RESEARCH PROJECT

PROPOSAL APPROVAL FORM

STUDENT NAME (Last Name, First Name)	STUDENT I.D. NUMBER
TELEPHONE	E-MAIL
CONCENTRATION	CURRENT TERM (Fall, Spring, Summer / Year)
CURRENT CUMULATIVE GPA	EXPECTED GRADUATION TERM (Fall, Spring, Summer / Year)
AREA OF RESEARCH Please get a synopsis of the Research Pro	oject Guidelines from the Registrar's Office.
1. PROPOSED TITLE AND BRIEF DE	SCRIPTION OF THE RESEARCH
2. NAME OF PROPOSED ADVISOR	
available for the term (see catalog or we university MBA faculty, please provide hi you cannot select an advisor, please const	s (BA 399) should be selected from the university MBA faculty ebsite). If you wish to select an advisor who is not listed as the s or her resume for the approval by the Dean/ Provost/ President. If ult with the Dean/ Provost/ President. If you decide to change your 8, you need to register again and get new approval from the Dean/
3. STUDENT'S CONFIRMATION	
(Student's Signature and Date)	
4. I AGREE TO ADVISE AND GRADE	THE RESEARCH PROJECT.
(Advisor's Signature and Date)	

5. ARE YOU CHANGING YOUR ADVISOR / TOPIC?YESNO
If "NO", please get your advisor's signature, get approval on this form from the Dean/ Provost/ President, and submit it to the Registrar's Office.
If "YES", please complete (#5a) in this form, get the necessary signatures (#4 and #5b), get approval on this form from the Dean/ Provost/ President, and then submit it to the Registrar's Office.
a. WHO WAS YOUR PREVIOUS ADVISOR / WHAT WAS YOUR PREVIOUS TOPIC? WHY DO YOU INTEND TO SWITCH ADVISOR / TOPIC?
b. I AGREE.
☐ I DO NOT AGREE. (Please explain below.)
(Signature of Previous Advisor and Date)
COMMENTS / REMARKS:
APPROVED BY THE REGISTAR OFFICE (Only for student initial registration of BA 399)
(Signature and Date)
APPROVED BY THE DEAN OF BUSINESS STUDIES/ PRESIDENT
(Signature and Date)

RO: 06/06/2024