

Eastern Michigan University
Submission of Master's Creative Project:
Children's Literature Program

Student's Name _____

Student's EID Number _____

Semester of Completion _____

Title of Completed Project

Approval of Completed Project: Signatures

Project Director Name _____ Signature _____

Date _____

Program Coordinator Name _____ Signature _____

Date _____

Graduate Coordinator Name _____ Signature _____

Date _____