

UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN  
DEPARTMENT OF URBAN AND REGIONAL PLANNING  
**THESIS (UP 599)**

Student's Name: \_\_\_\_\_

Topic: \_\_\_\_\_

Project Advisor: \_\_\_\_\_

Second committee member: \_\_\_\_\_

**Authorization to enroll**

I certify that \_\_\_\_\_, for whose Master's Thesis (UP 599) I am serving as Principal Advisor, has submitted to me, on or before this date, an acceptable (a) detailed outline, (b) detailed work plan, (c) bibliography, (d) introductory chapter (or its equivalent); or other written evidence of adequate progress.

I therefore recommend this student's enrollment in UP 599 for the \_\_\_\_\_ Semester.

Signed:        Project Advisor \_\_\_\_\_ Date \_\_\_\_\_

Approved:     Academic Advisor \_\_\_\_\_ Date \_\_\_\_\_

                  MUP Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Unless this form is received before the beginning of the semester in which enrollment is desired, the student's enrolment in UP 599 will not be permitted.