

APPLIED PLANNING RESEARCH PROJECT APPROVAL FORM
UCLA Department of Urban Planning

The final, signed approval form must be submitted to the Graduate Advisor by
Tuesday of Week 9 at 5:00 pm

Student Name: _____ UID: _____

Project Title: _____

Client: _____

Project Approvals

1. Client Approval: Approval of the project by the outside client must be sent to Brandon Basa via email.
2. Faculty Chair Approval: Your faculty chair must certify that the above student has fully completed an applied planning research project of satisfactory scope, scale, rigor, and quality to satisfy the capstone requirement for the Master of Urban and Regional Planning at UCLA.

Faculty Chair Name (print): _____

Faculty Chair Signature: _____

Student Certification

The student must certify that all source material for the project stated above has been properly and fully cited and all work on the project was done by the student author, unless specifically noted otherwise in the document.

Student Signature: _____ Date: _____

FOR DEPARTMENT USE ONLY

The Director of the MURP Program must certify that the student stated above has completed a satisfactorily-written, polished, and professional piece of applied planning research of sufficient quality to satisfy the capstone requirement for the Master of Urban and Regional Planning at UCLA.

MURP Program Director Name (print): _____

MURP Program Director Signature of Approval: _____

If not approved please state why: