



San José State
UNIVERSITY

SAN JOSÉ STATE UNIVERSITY
SCHOOL OF LIBRARY AND INFORMATION SCIENCE

THESIS FORM

Student's Name: _____

SJSU ID #: _____

e-mail: _____

Phone Number: _____

Thesis: Title and Brief Description (500 words or less):

Thesis Committee: Names and Titles

1) (chair): _____

2): _____

3): _____