



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): \_\_\_\_\_