PHD DISSERTATION PROPOSAL FORM

Student’s Name: 
Date of the defense: 
Student’s ID: 

Dissertation Title: 

________________________________________________________

________________________________________________________

Please circle the result of the presentation – Pass or Fail

Please sign in the space below

__________________________________________
Major Professor Signature

Print Name

__________________________________________
Committee Member Signature

Print Name

__________________________________________
Committee Member Signature

Print Name

__________________________________________
Committee Member Signature

Print Name

__________________________________________
Outside Member Signature

Print Name

Is this defense also considered an oral portion of the PhD Comprehensive Exam?

YES _____ NO _____ Please circle the result – Pass or Fail

What is a format of the written portion of the PhD Comprehensive Exam?

________________________________________________________

Please circle the result -- Pass or Fail

Department’s Graduate Director: ____________________________

Signature