



**PH.D. PROPOSAL DEFENSE RESULT**

*The proposal defense must be done no later than 6 months prior to the dissertation defense*

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Proposal Defense Date: \_\_\_\_\_

Title: \_\_\_\_\_

\_\_\_\_\_

*A copy of the written dissertation proposal must be submitted with this form.*

The committee in charge reports the following result of the dissertation proposal defense:

| <b>Exam Passed</b><br><i>(Yes or No)</i> | <b>Committee Member</b> <i>(print name)</i> | <b>Signature</b> |
|--|---|------------------|
| _____                                    | _____<br>Committee Chair                    | _____            |
| _____                                    | _____<br>Member                             | _____            |
| _____                                    | _____<br>Member                             | _____            |
| _____                                    | _____<br>Member                             | _____            |

Comments:  
\_\_\_\_\_  
\_\_\_\_\_

Note: All PhD dissertation committee members must be present for this proposal defense.

\_\_\_\_\_  
Graduate Advisor Signature

\_\_\_\_\_  
Date