

# Dissertation Prospectus Approval

Date: \_\_\_\_\_

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

Year of Matriculation: \_\_\_\_\_

*Please provide specific comments in each of the following areas:*

Comments on remaining experiments/structure of thesis:

Publications: (approval of the prospectus requires, at a minimum, a first-author manuscript or equivalent submitted for publication)

Signature – Advisor

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 Signature

\_\_\_\_\_  
 Print Name

Signatures - Committee

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