

## Form for the Approval of Ph.D. Dissertation Proposal

Student: Name (Semester Year - present)

Qualifying Exam Date: MM/DD/Year Proposal Date: MM/DD/Year

Title: Dissertation topic

### Research Summary

Please enter a summary of your Ph.D. research.

As the advisor, I certify that I have read and approved the dissertation proposal prepared by Name of the student for his/her dissertation requirement for the Degree of Doctor of Philosophy.

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

Advisor: \_\_\_\_\_

