

Thesis Proposal Committee

Please turn in to the Graduate Coordinators Office

Name: (print) _____

UMID: _____ Email: _____

Please consider the following for my Thesis Proposal Committee:

NOTE: The TP committee must consist of 3 faculty (2 from ECE). If this is your defense committee, you need 4 faculty (2 from ECE).

Chair/Co-Chairs:

Name	Rank/Title	Department
Name	Rank/Title	Department

Cognate member:

Name	Rank/Title	Department
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Other member(s):

Name	Rank/Title	Department
Name	Rank/Title	Department
Name	Rank/Title	Department

Thesis Proposal Title: _____

- I will use the committee as my Dissertation Committee.
- I will NOT use this committee as my Dissertation Committee (you must form your dissertation committee within 48 months of entering the ECE PhD program)

For department use:

Thesis Proposal Committee is / is not approved.

Dissertation Committee is / is not approved.

ECE Grad Chair: _____ Date: _____

Thesis Proposal Presentation

Please print off and bring to your Thesis presentation

TITLE: _____

_____ has presented a Ph.D. Thesis proposal on _____

- 1) Thesis Proposal presentation was satisfactory
- 2) Student did not present an acceptable proposal and will take immediate steps to refine the proposal.

Comments (optional):

Signature

Signature

Signature

Signature

Signature

Signature