

This form must be completed and submitted to GSAS by the department or doctoral program.

STUDENT NAME Last:	First:	STUDENT UNI
DOCTORAL PROGRAM	<input type="checkbox"/> ICLS	STUDENT PID/ ID NUMBER
AREA OF SPECIALIZATION		
DISSERTATION SPONSOR	CO-SPONSOR (if applicable)	

TITLE OF PROPOSED DISSERTATION	
DATE OF EVALUATION	CHECK HERE IF THE PROSPECTUS IS A REQUIREMENT FOR THE M.PHIL. <input type="checkbox"/>

List the members of the Dissertation Prospectus Committee:

COMMITTEE MEMBER	EMAIL
DEPARTMENT	PHONE UNI
COMMITTEE MEMBER	EMAIL
DEPARTMENT	PHONE UNI
COMMITTEE MEMBER	EMAIL
DEPARTMENT	PHONE UNI

By signing in the “YES” column below, the members of the Dissertation Prospectus Committee approve the proposal indicated above, agreeing that it meets all program requirements and is acceptable in both its content and its timetable for completion. The members voting “YES” thus recommend that the candidate proceed according to the approved proposal and under the supervision of the Dissertation Sponsor named above.

SIGNATURES OF COMMITTEE MEMBERS VOTING “YES”	SIGNATURES OF COMMITTEE MEMBERS VOTING “NO”
_____	_____
_____	_____
_____	_____

Please complete this section **ONLY** if members of the defense committee are different than the dissertation prospectus committee.

COMMITTEE MEMBER	EMAIL
DEPARTMENT	PHONE UNI
COMMITTEE MEMBER	EMAIL
DEPARTMENT	PHONE UNI
COMMITTEE MEMBER	EMAIL
DEPARTMENT	PHONE UNI