

Michigan Technological University CFRES

Report on Ph.D. Research Proposal Examination

This form is required for the following degree: Ph.D.

The research proposal examination must be completed and recorded within 6 years of enrollment.

This form is for use by programs for internal record-keeping and verification of exam results and should not be sent to the Graduate School.

Provide information about you and your program.

Last Name, First Name, MI: _____

M Number (ex. M12345678): _____

Graduate Program: _____

This certifies that a proposal for research on the topic:

_____ presented by the above student has been examined and approved by the Advisory Committee (as named on the Advisor and Committee Recommendation Form) as appropriate for a PhD dissertation.

_____ Date of research proposal examination.

Approval Signatures

Please print or type name to the left of the signature.

_____	_____
_____	_____
_____	_____
_____	_____

Obtain administrative approval. Print or type name next to the signature.

Have graduate assessment forms (GLOs) been completed for this candidate? Yes No