PHD PROSPECTUS DEFENSE FORM

DEPARTMENT OF CHEMICAL and BIOMEDICAL ENGINEERING FAMU-FSU COLLEGE OF ENGINEERING

Student Name:	Date for Prospectus Defense:
Student ID Number:	
Title of Prospectus: The above named student has successfully defended the PhD prospectus Committee recommendations if the student does meet the requirements	
Name:	Name:
Signature:	Signature:
Committee Member #1	Committee Member #2
Name:	Name:
Signature:	Signature:
Committee Member #3	Committee Member #4 (optional)
Name:	Name:
Signature:	Signature:
Committee Member #5 (optional)	Committee Member #6 (optional)
Name:	Name:
Signature:	Signature:
Graduate Committee Chair	Department Chair