



**Ph.D. in Informatics
Dissertation Research Prospectus Form**

(Please attach proposal abstract of 1-2 pages)

Student's Name: _____ IUID# _____

Student's Email: _____ Date: _____

Dissertation Proposal Title: _____

Date of Proposal Defense: _____

Results (Pass/Fail) and Recommendations:

Re-defense Date (if necessary): _____

Results (Pass/Fail) and Recommendations:

Research Committee Chair: (If doing a double major, you will be required to have each chair from both departments sign)

Name: _____ Signature: _____ Date: _____

Research Committee Chair:

Name: _____ Signature: _____ Date: _____

Research Committee:

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Approval by Director of Graduate Studies, Informatics:

Signature: _____ Date: _____