## CARL H. LINDNER COLLEGE OF BUSINESS

**Proposal Defense and Committee Form**

(to be completed by the department and returned to the PhD Program Director or PhD office)

From: Departmental Program Coordinator This is to certify that in the Department of

Sub-Area (OBAIS Only)

ID Number

Has successfully defended the dissertation proposal for the degree of

# Doctorate of Philosophy (Ph.D.)

### DISSERTATION COMMITTEE MEMBERS:

, Chair

Print Name Signature

Print Name Signature

Print Name Signature

Print Name Signature

Print Name Signature

### Proposal Defense Date:

PhD Program Director Date