

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 _____

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