



Chemistry Graduate Program
Form C7- Application for Program Requirement

Student Name

Student Number

Classification: M.S. Ph.D.

Check the box for the applicable requirement:

- Thesis Research Plan Proposal
- Research Seminar Presentation
- Original Research Proposal
- Thesis/Dissertation Defense

Student's Committee members:

We have received a copy of this student's manuscript and request that the presentation of this program requirement be set for:

Date/Time/Location: _____

_____ Committee Director	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department

Application approved by:

Signature of the Chemistry Graduate Program Coordinator

Date