THESIS COMMITTEE RECORD

This form must bear the signatures of all committee members present. Please return the original to your program manager or PI. Copies will then be distributed to each committee member.

Student's name: _____

Today's Date:_____

Date of last meeting: _____

THESIS COMMITTEE

Thesis committee member names (please print)	**Signatures of committee members present***
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(* Note reasons for absence of any advisor from meeting on signature line)

Progress since last meeting

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Experiments to be done

Recommendations and comments (for student and advisor):