Graduate School of Biomedical Sciences

The University of Texas Health Science Center at San Antonio

RECOMMENDATION FOR APPROVAL OF DISSERTATION RESEARCH PROPOSAL AND SUPERVISING COMMITTEE

Please submit this form with a computer file containing your proposal to the Office of the Graduate Dean. The computer file should be in RTF, HTML or PDF format.

*(Please **type** all information below)*

Candidate	Degree	Program

The Committee on Graduate Studies of the program has reviewed and agreed to recommend approval by the Dean of the dissertation research proposal entitled:

Title of Proposal

to be conducted by the above candidate in partial fulfillment of the requirements for the degree. Signatures are required for all Committee members except the External Member. **By signing, you attest that you have read and approved the final version of the dissertation proposal and you agree that the proposed work is appropriate for a PhD dissertation project.**

Chair and Supervising Professor (please type)	Dept./Rank	Signature	Institution
Member (Program) (please type)	Dept./Rank	Signature	Institution
Member (Program) (please type)	Dept./Rank	Signature	Institution
Member (Program) (please type)	Dept./Rank	Signature	Institution
HSC Member (Outside Program) (please type)	Dept./Rank	Signature	Institution
External Member (Outside HSC) (please type)	Dept./Rank	(Signature not required)	Institution

Submitted by the Committee on Graduate Studies

Signature, Chair of COGS — Date

Approved

Signature, Associate Dean of the Graduate School of Biomedical Sciences — Date