

First Research Committee Meeting: Preliminary Program Outline

Form #: 1

NAME: _____

MEETING DATE: _____

Formal Course Work:

a) Required courses, including Graduate Seminar courses:

<u>Course Number</u>	<u>Title</u>	<u>Credits</u>
----------------------	--------------	----------------

b) Other recommended courses:

PhD Students Only: Components and Mechanisms for Completion of the Qualifying Examination Oral Proposal Defense:

Subject Areas

Mechanisms: Course(s) or Examination(s)

_____	_____
_____	_____
_____	_____
_____	_____

Recommended Informal Training and/or Comments by Research Committee:

Please PRINT Research Advisor and Research Committee Member names:

Research Advisor: _____

Committee Members: _____

File this form with the Biology Graduate Program Administrator after your first Research Committee meeting by *no later than* the end of your 3rd semester.

DATE FILED: _____