

D | A | A | P

College of
DESIGN
ARCHITECTURE
ART
PLANNING

ACCEPTANCE OF DISSERTATION PROPOSAL

A copy of this form must be retained in the student's file.

STUDENT INFORMATION

Student Name: _____ * _____

Date Entering the PhD Program: _____

Date of the Proposal Defense: _____

Title: _____

Student Signature Date

All the appropriate faculty members have accepted the proposal:

Chairperson Signature Date

Committee Member (Minor) Signature Date

Committee Member (Methodology or at-large) Signature Date

PhD Program Director Signature Date

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