

Prospectus Defense Approval Form

Student Name:				
FSU ID:				
Defense Date:				
Prospectus Title:				
				
Dissertation Committe	ee Members:			
Printed:	Signature:		Approv	al:
		(Major Professor)	Yes	No
		(Member)	Yes	No 🗌
		(Member)	Yes	No 🗌
		(Member)*	Yes	No 🗌
		(University Representative	e) Yes	No 🗌

^{*}Per university requirements four committee members are required. An additional member may be added if needed. This is optional.