

REPORT ON THE DISSERTATION PROPOSAL MEETING

UCB DEPARTMENT OF PSYCHOLOGY

Date of meeting: _____

Name of student: _____

Committee members: _____
(Chair)

(Inside member)

(Inside member)

(Inside member)

(Outside member)

Please note: The members listed above are the signing members (i.e., the official dissertation committee on record in the Graduate Division). The members listed below are the non-signing members. The role of the non-signing members is to advise and provide feedback on the proposal.

(Additional member)

(Additional member)

- Approved.** The committee approves the student's dissertation proposal in its entirety.
- Approved with Revisions.** The committee approves the student's dissertation proposal contingent on the following revisions being made:
- Not Approved.** The committee does not approve the student's dissertation proposal. The following revisions need to be made and the proposal needs to be resubmitted:

Description of Revisions Needed:

I have agreed to revise the above noted areas and have agreed, with the committee, that the revisions should be completed no later than:

Signature of Student: _____

On behalf of the committee, I certify that the information above is correct.

Signature of Chair (or Co-Chair): _____

Signature of Co-Chair (if applicable): _____