

**City & Metropolitan Planning
Ph.D. Dissertation Proposal Examination Form**

Complete and submit to the CMP Office

Candidates will prepare and defend their proposal for a dissertation based on the plan and format negotiated with the Supervisory Committee

First Name: _____ Last Name: _____ UNID: _____

Date of Oral Exam:

Check One: Pass Conditional Pass Fail

Conditional Pass Comments:

Committee Members:

Name (Chair) _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____

Name _____ Signature _____