

THESIS COMMITTEE RECORD

This form must bear the signatures of all committee members present. Please return the original to Michaela Tippl. Copies will then be distributed to each committee member.

Student's name: _____

Today's Date: _____

Date of last meeting: _____

Progress since last meeting

Experiments to be done

Recommendations and comments (for student and advisor):

Thesis committee members (please print)

Signatures of committee members present*

(* Note reasons for absence of any advisor from meeting on signature line)