

**COMPREHENSIVE  
EXAM (PROPOSAL  
PRESENTATION)  
SCHEDULING FORM**

DATE: \_\_\_\_\_

STUDENT: \_\_\_\_\_ (Student Name) \_\_\_\_\_ (ID #)

DISSERTATION TITLE: \_\_\_\_\_

DATE OF COMPREHENSIVE EXAM/PROPOSAL PRESENTATION: \_\_\_\_\_

LOCATION OF COMPREHENSIVE EXAM/PROPOSAL PRESENTATION: \_\_\_\_\_

As Dissertation Chair, I certify that the aforementioned student has submitted their proposal as PI for potential funding to the following funding agency on the date listed below:

FUNDING AGENCY: \_\_\_\_\_

DATE OF SUBMISSION: \_\_\_\_\_

Even if above proposal is not funded, the dissertation chair is expected to provide sufficient resources necessary for completion of the proposed work presented at the date above.

If the student has not submitted their proposal for potential funding or was not listed as PI, please leave the above section blank and explain the reason why the requirement has not been met.

SIGNATURE: \_\_\_\_\_  
Dissertation Committee Chair, BE Department Faculty

EXPLANATION (IF NEEDED):  
  
\_\_\_\_\_

The student listed above is approved to present their dissertation proposal on the requested date.

\_\_\_\_\_  
Signature of ISSTBE PhD Program Director

\_\_\_\_\_  
Date

*INSTRUCTIONS: Student sends completed form to ISSTBE PhD Program Directors at least 2 weeks before date of comprehensive exam. Dissertation Committee Chair & student must retain a copy of this form.*