

Ph.D. RESEARCH PROPOSAL DEFENSE REPORT

This form must be completed by either the Dissertation Committee Chair or the Doctoral Program Director immediately after the proposal defense and submitted to the Office of Graduate Studies, Fenster Hall, Suite 140. The research proposal must be approved within a year after the passage of the qualifying examination.

The last person signing the form (either the Program Director or Department Chair) should submit the digitally signed form to gso-forms@njit.edu

Name of Doctoral Candidate _____
Last First

Ph. D. Program _____ ID# _____

Preliminary Title of Dissertation _____

Date of Proposal Defense _____

DISSERTATION PROPOSAL COMMITTEE INFORMATION

Dissertation Advisor or Co-Advisors:

Name	Department/Affiliation	Rank	
_____ Print	_____	_____	_____ Signature
_____ Print	_____	_____	_____ Signature

Members of Dissertation Proposal Committee at Proposal Defense:

Name	Department/Affiliation	Rank	
_____ Print	_____	_____	_____ Signature
_____ Print	_____	_____	_____ Signature
_____ Print	_____	_____	_____ Signature
_____ Print	_____	_____	_____ Signature
_____ Print	_____	_____	_____ Signature
_____ Print	_____	_____	_____ Signature

Results of Defense: ☐ Pass ☐ Fail ☐ Pass with Conditions

Conditions: _____

Date conditions have been met Print Name Signature

Doctoral Program Director

Print Name Signature Date

Department Chair

Print Name Signature Date

Graduate Studies

Sotirios G. Ziavras

Print Name Signature Date