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Education Office 617-253-3380 eaps.mit.edu

PhD Thesis Defense Proposal and Committee Selection Form

Candidate Name: _____ Date: _____

Thesis Tentative Title:

This form may be submitted for notification related to either requirement below. Complete the appropriate sections(s). Return the form to the Education Office.

COMPOSITION OF THESIS EXAMINATION COMMITTEE

This is: ____ New ____Amended ____ Previous composition for the committee. Submit this form at any time to change the membership of your thesis committee.

Committee Member *	_Thesis Advisor
Committee Member *	_EAPS faculty member within program area
Committee Member *	_EAPS faculty member outside program_area
Committee Member *	_Optional
Committee Member **	_faculty member outside EAPS

*required members of a committee for a Masters thesis
** may be identified at any time prior to thesis defense

APPROVAL OF THESIS PROPOSAL

No more than 6 months after completing your general exam, you should present a thesis proposal to your committee for approval. Their acceptance of your proposal is indicated by your advisor's signature below. Please attach an abstract of our proposal. If there is no change in your committee membership, and all members were involved in approving the proposal, please list those members who were present.

Committee Meeting Date:

Thesis Advisor Signature: