The University of Mississippi

Thesis / Dissertation Prospectus Approval Form

DEPARTMENT OF BIOLOGY
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Name: _____ **Degree Program: M.S.** _____ **Ph.D.** _____

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_____

_____

COMMITTEE SIGNATURES:

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(Major Advisor – Signature)	**(Print Name)**	**(Date)**
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(Committee Member – Signature)	**(Print Name)**	**(Date)**
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(Committee Member – Signature)	**(Print Name)**	**(Date)**
_____	_____	_____
(Committee Member – Signature)	**(Print Name)**	**(Date)**
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(Committee Member – Signature)	**(Print Name)**	**(Date)**

*A printed copy of approved prospectus must accompany this form.

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