Name: ____________________________________________________________

UW I.D. #: _________________________________________________________

Thesis topic: _______________________________________________________

Today's date: _______________________________________________________

Committee members:
A) Major advisor(s):
   _________________________________________________________________
   _________________________________________________________________

B) CBE Faculty or CBE Affiliate Faculty in your general area of research:
   1) ______________________________________________________________
   2) ______________________________________________________________

C) Additional CBE Faculty or CBE Affiliate Faculty member not in your general area of research:
   _________________________________________________________________

Date and Time of Preliminary Oral Exam: _____/_____/______ at ____:____ AM/PM
(circle or highlight one)

Location of Preliminary Oral Exam: □ Remote via ___________ or □ In Person in room _____________

Proposed Minor:
____________________________________________________________________
(Option A – Name it. For example: Option A: Music) (Option B: Distributed)

Proposed Date of Completion of Minor (Must be in 6 digits) _______/_____/______