

**Brain and Cognitive Sciences Department Thesis Committee Meeting
FIFTH YEAR (and above) FORM**

Instructions:

Student –complete section I, attach II, III, IV, V, VI, and IX (if applicable), and submit to your committee two weeks prior to your meeting. Print this form, bring with you to the meeting, and obtain approval signatures.

Student and committee members – attach comments (VII) during the meeting and sign the form.

Advisor – please include your advising plan (VIII).

I. Basic Information

Student Name: _____	Entry Year: _____
Advisor: _____	Meeting Date: _____
Committee Chair:	
Committee Members:	

II. Attach a time line for graduation.

III. Attach your CV.

VII. Attach committee's comments.

Signatures:

Student: _____
Advisor: _____
Member(s): _____
Committee Chair:

After the meeting, return the signed form to the Academic Office, 46-2005