



School of Systems Biology  
10900 University Blvd., MS 5B3  
Manassas, VA 20110

### PhD PROPOSAL APPROVAL

Student Name \_\_\_\_\_ Mason ID # \_\_\_\_\_

\_\_\_\_\_ **PhD Biosciences** - Concentration \_\_\_\_\_

\_\_\_\_\_ **PhD Bioinformatics and Computational Biology**

Please attach copy of proposal and updated Program of Study that includes future 999 courses.

We, the undersigned committee, approve the attached dissertation proposal titled:

\_\_\_\_\_.

#### Committee Approval:

\_\_\_\_\_  
Printed Name--Chair or Faculty Advisor      Signature      Date

\_\_\_\_\_  
Printed Name      Signature      Date

\_\_\_\_\_  
Printed Name      Signature      Date

\_\_\_\_\_  
Printed Name      Signature      Date

#### Department Approval:

\_\_\_\_\_  
Graduate Program Director      Date

\_\_\_\_\_  
Director, School of Systems Biology      Date