



School of Systems Biology
10900 University Boulevard, MS 5B3
Manassas, Virginia 20110

PHD PROPOSAL APPROVAL

Student Name (please type) _____ ID # _____

PhD Biosciences, Concentration _____

PhD Bioinformatics and Computational Biology

We, the undersigned, approve the **attached dissertation proposal** (must be attached to be valid) titled

Committee Approval:

Chair Signature Date

Co-Chair or Member Signature Date

Member Signature Date

Member Signature Date

Member Signature Date

Department Approval:

Graduate Program Director Signature Date

Director, School of Systems Biology Signature Date