## 4th Year Ind. Research Proposal Form

Please complete and return this form along with an electronic copy of your written proposal(s), to Graduate Registrar/DGS Academic Support Assistants - Isabel Cruz, Kara Swenson & Maggie Simonsen at <a href="mailto:chemistry.dgs@yale.edu">chemistry.dgs@yale.edu</a> by May 31st.

Name:		
Research Divsion:		SID: Year of Study:
Date Completed:		
Title of Research Prop	posal:	
Committee Members'	Comments:	
Oral Exam: Pass	Fail	Written Proposal: Pass Fail
Committee Member (Please print or electron must be your Advisor of	nically sign all comm	Signatures:  ittee member names. Only two members must sign, one of which an). Committee can forward approvals via email if preferred.
*Please indicate your F	Research Advisor wit	h an asterisk*
		Date:
		Date:
		Date