

## REPORT OF ORAL REVIEW OF DISSERTATION PROPOSAL

Candidate's Name \_\_\_\_\_

ID# \_\_\_\_\_ Program Name *Media, Culture, and Communication (MCCD)*

Title of Proposal \_\_\_\_\_

Degree *Ph.D.* \_\_\_\_\_ Date of Oral Review \_\_\_\_\_

### Outcome of Review

\_\_\_\_\_ I. Proposal approved. (Review panel may have offered suggestions, which are not a matter of official record, to the candidate and the dissertation committee.)

\_\_\_\_\_ II. Proposal approved with agreed upon revisions. (Attached are the review panel's comments and the candidate's responses, endorsed by the chairperson of the dissertation committee and approved by the chairperson of the review panel. Attachments to the Office of Graduate Studies only).

\_\_\_\_\_ III. Proposal not approved. (Basis for disapproval attached, signed by the reviewers.)

	<i>Name</i>	<i>Signature</i>
<b>Committee</b>		
Chair:	_____	_____
Member:	_____	
Member:	_____	

### Reviewers

Member:	_____	_____
Member:	_____	_____

## Proposal Review: Suggestions for Revision

\_\_\_\_\_ 1. The following suggestions for revision were accepted by the student and Chairperson of the dissertation committee. (Attach another sheet if necessary.)

\_\_\_\_\_ 2. The following suggestions for revision were rejected by the student and Chairperson of the dissertation committee. (Attach another sheet if necessary.)

\_\_\_\_\_  
Student

\_\_\_\_\_  
Chair of Dissertation

\_\_\_\_\_  
Member of Review Panel

\_\_\_\_\_  
Member of Review Panel