

**PROSPECTUS APPROVAL FORM  
THE UNIVERSITY OF GEORGIA  
CHEMISTRY DEPARTMENT**

Name \_\_\_\_\_

810/811 No. \_\_\_\_\_

has completed his/her prospectus.

**Title or brief description of research project:**

<b>Doctoral Advisory Committee</b>	<b>Approve</b>	<b>Disapprove</b>	<b>Date</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Major  
Professor** \_\_\_\_\_

**Date** \_\_\_\_\_

**Graduate  
Coordinator** \_\_\_\_\_

**Date** \_\_\_\_\_

Please return completed form to Graduate Program Administrator

