

Department of Communication
Stanford University

DISSERTATION PROPOSAL

Supplemental Sheet for PhD Requirements Form

Student Name: _____

SUID: _____

Advisor: _____

_____ passed _____ failed

Date of proposal meeting:

Title:

Supervising Committee:

Name

Department

Principal Advisor

Other Reader

Other Reader

Other Reader

Other Reader
(optional)

Approval: _____

(advisor)

(date)

When complete, please submit to Students Services Office, Department of Communication