**FORM 1.**

**Integrative Biology Graduate Program**

**Research Proposal Approval Form**

STUDENT NAME:

PROPOSAL TITLE:

By signing below, I acknowledge that I have reviewed this research proposal and judge it to be an acceptable and actionable part of this student’s degree program.

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| --- | --- | --- |
| **Please print or type names below** | **Signature** | **Date** |
| Major Professor |  |  |
| Co-Major Professor |  |  |
| Committee Member |  |  |
| Committee Member |  |  |
| Committee Member |  |  |
| Committee Member |  |  |
| Graduate Council Representative | (GCR is optional at this meeting) |  |

###### Please submit this fully signed form (hard copy or electronic) and your research proposal (electronic copy) to the IB Graduate Program Coordinator (Traci) in the IB Department Office.[durrellt@science.oregonstate.edu](durrellt%40science.oregonstate.edu)Traci can also assist you in collecting signatures by routing the form through DocuSign.