

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.

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](mailto:Traci.durrellt@science.oregonstate.edu)) in the IB Department Office.
durrellt@science.oregonstate.edu

Traci can also assist you in collecting signatures by routing the form through DocuSign.