Name of Candidate: ___________________________ BUID# ___________________________
Date Accepted: ___________________________ Program: ___________________________
Date of Hearing: ___________________________ Previous Hearing: ___________________________
Title of Dissertation: ___________________________________________________________

**MEMBERS OF COMMITTEE***

* No substitution of committee members will be honored at hearing. If the full committee cannot be present, the Hearing cannot be held.

First Reader: ___________________________
Second Reader: ___________________________
Third Reader: ___________________________
Fourth Reader Consultant: ___________________________

Record below: (1) each motion acted upon; and
(2) the number of votes for and against each motion:

<table>
<thead>
<tr>
<th>Motion Acted Upon</th>
<th>Votes For</th>
<th>Votes Against</th>
</tr>
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</table>

Indicate clearly, on the back of this form or attached sheets, the specific suggestions (to be) transmitted to the candidate for revision of the research proposal in relation to the action(s) recorded above.

Signatures:

first reader ___________________________
second reader ___________________________

third reader ___________________________
fourth reader / consultant ___________________________

Date: ___________________________

circle one: approved ___________________________ not approved ___________________________