



CBB

PROGRAM IN COMPUTATIONAL BIOLOGY & BIOINFORMATICS

RECOMMENDATION FOR MASTER'S OF SCIENCE THESIS EXAMINATION COMMITTEE

The recommendation for M.S. Thesis Examination Committee form, completed by the program chair, must be received in the office of the Program in Computational Biology & Bioinformatics at least three (3) weeks before the date of the closed oral presentation/examination. The committee must include no fewer than three full-time members of the Northwestern University faculty, two of whom, including the chair, must be members of the Graduate Faculty. The chair of the committee is expected hold an appointment with the students Program.

Student's name: _____
Last, family, or surname
First name
Middle Initial

NU ID number: _____

Current address: _____
Number and Street
Apt
City
State
Zip

_____ *Phone number* _____ *E-mail address*

Scheduled date of closed oral presentation/examination: _____

Date degree is expected: _____

RECOMMENDED COMMITTEE

Typed name	Department/Program
(chair) _____	_____
_____	_____
_____	_____
_____	_____

COMMITTEE CHAIRPERSON

Typed name _____ Signature _____
 Program _____ Date _____

RETURN TO THE CBB PROGRAM OFFICE (TECH L550) BY 5:00pm ON THE DEADLINE DATE.