



MARQUETTE UNIVERSITY GRADUATE SCHOOL INTERDISCIPLINARY PHD COMMITTEE AGREEMENT FORM

Section A: (Instructions to the INPR candidate) Please type your name directly below.

INPR Candidate's Name:

Section B: (Instructions to the INPR candidate) Please type each of your committee member's names in the left-hand column, and obtain each member's signatures in the right-hand column.

We, the undersigned, agree that this interdisciplinary PhD proposal meets our requirements and standards. We have been consulted on this proposal, have reviewed it, and agree that it is ready to go before the University's Board of Graduate Studies for approval.

INPR Committee Chair:

Chair's Signature:

Date:

INPR Committee Member:

Member's Signature:

Date:

INPR Committee Member:

Member's Signature:

Date:

INPR Committee Member:

Member's Signature:

Date:

INPR Committee Member:

Member's Signature:

Date:

INPR Committee Member:

Member's Signature:

Date: