## **QUALIFYING PAPER APPROVAL FORM**

Name of Student:					
Area to cover in Quals	s:				
Date Prospectus Submitted			Date Prospectus Approved		
Qualifying Paper Due Date			Qualifying Paper Feedback Date		
Prospectus approval:					
Members of Quals Committee: (fill in names) Chair:	Area 1:	Area 2:		Area 3:	Area 4:
Qualifying Paper appr	oval:				
Members of Quals Committee: (fill in names)	Area 1:	Area 2:		Area 3:	Area 4:
Chair:					