

Doctoral Dissertation/Project Proposal Hearing Request Form

Please select a Program: _____

Student's Name: _____ Banner ID: _____

The tentative title and a brief description of the dissertation/project is:

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	Choose One [Yes or No]	
Research will involve human subjects	<input type="checkbox"/>	If yes, IRB approval is required PRIOR to initiating research.
Research will involve animals (vertebrate)	<input type="checkbox"/>	If yes, IACUC approval is required PRIOR to initiating research.
Research will involve DNA, potentially infectious materials, or toxins	<input type="checkbox"/>	If yes, IBC approval is required PRIOR to initiating research.

Anticipated Proposal Hearing Date: _____

Anticipated Dissertation/Project Defense/Final Exam Date: _____

Anticipated Graduation Date: _____

Signatures Required (student and chair acknowledge IRB approval of protocol is required prior to initiating research):

Student (Signature) Type Name Date

Dissertation Committee Chair (Signature) Type Name

Program Coordinator (Signature) Type Name

For more information, visit <http://research.tamucc.edu/compliance/index.html>

Complete this form. Upload to CGS website to be routed for signatures. Form should be submitted no later than two weeks prior to the hearing and, at minimum, two semesters prior to the student's anticipated graduation. Contact CGS with questions 361.825.2174.

For Graduate Office Use Only:

Copy sent to College _____ Date: _____ Informed Academic Advisor _____ Date: _____

Entered into Spreadsheet _____ Date: _____

Deans, CGS Approval _____