

**FIRST THESIS COMMITTEE MEETING FORM**

Student: \_\_\_\_\_ Thesis Advisor: \_\_\_\_\_ Meeting Date: \_\_\_\_\_

**To Student:** Share this completed form, copies of your undergraduate and graduate transcripts, and a brief (1- to 2-page) outline of your proposed research with your committee no less than one week prior to your meeting. Identify which courses apply to IPIB’s breadth requirement ([2024-25 IPIB Handbook](#), Section 3.10.1).

Give a brief (5- to 10-minute) presentation on your planned research project to help the committee determine if your past and proposed coursework supports your area of specialization. Waivers or substitutions must be approved by the IPIB Education and Career Development Committee (ECDC).

Return the completed and signed form to Kate Ryan.

**To Committee:** Advise the student on what additional coursework, if any, you recommend in support of their research. Your signature on this form indicates your approval of the student’s planned curriculum.

**Coursework completed and proposed** (not including 990 advanced research or seminars):

Course	Meets breadth requirement B, P, or Q? <sup>1</sup>	Credits / Grade	Semester
BIOCHEM/BMOLCHEM 701	N/A	1 / ____	Fall 2024
BIOCHEM 719	N/A	3 / ____	Fall 2024
BMOLCHEM 720	N/A	3 / ____	Spring 2025
BIOCHEM 721	N/A	2 / TBD	Fall 2025

<sup>1</sup> A minimum of 6 approved-course credits in at least two areas: **B**iological, **P**hysical, and /or **Q**uantitative

**Does the Committee recommend additional coursework or training or request any waivers or substitutions?**

**Signatures designating approval of the course plan:**

Student: \_\_\_\_\_ Thesis Advisor: \_\_\_\_\_

Committee: \_\_\_\_\_

\_\_\_\_\_

ECDC: \_\_\_\_\_ Date: \_\_\_\_\_

