

California State University, Sacramento
Department of Biological Sciences

REQUEST FOR SCHEDULING THE THESIS (PROJECT) SEMINAR

To: _____
Graduate Coordinator

My signature below verifies that my graduate student, _____,
has completed her/his thesis research and a satisfactory first draft of her/his thesis. Please
schedule her/his Thesis Seminar at the earliest date that is acceptable to the student, the members
of the Graduate Committee, and the members of the student's Supervisory Committee. The other
members of the Supervisory Committee are:

_____, and _____.

Thank you,

Signature of Major Professor: _____ Date: _____

Name of Major Professor: _____

Student's E-mail address: _____

Exact title of the thesis: _____

Recommended meeting dates (include 3 possible dates and times in order of preference):

Date	Day of the Week	Time