Bioengineering Interdisciplinary Graduate Program

Request for Approval of Thesis/Dissertation Committee

Date:				
Student Name:				
Email Address:				
Committee f	or the		udent. Ple	mbers of the Thesis/Dissertation ease let me know at your earliest
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Faculty Advisor				Date
Approved:	Dr. H	ang Lu		Date
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Please email or return to Laura Paige, Room 1103, IBB Building. (laura.paige@bioengineering.gatech.edu)