

UNIVERSITY OF HOUSTON

COLLEGE OF PHARMACY

Department of Pharmacological and Pharmaceutical Sciences

APPOINTMENT OF MAJOR ADVISOR

Student name (print) _____
Last First Middle

PSID# _____ Program (circle one) PCEU PCOL MedChem

Project title _____

I understand that I am committed to:

1. organizing my thesis committee within 6 mos of my signing this document;
2. taking my oral and written qualifying examinations by the end of my seventh long semester.

Student signature _____
Date

Major Advisor approval, print name: _____

Major Advisor, signature: _____
Date

Co-advisor (if applicable), print name: _____

Co-advisor (if applicable), signature: _____
Date

Approved _____
Chair Graduate Education Committee Date

Approved _____
Chair, PPS Date

22 Aug 2011