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Doctoral Research Activity Report

Student Name: _____

Student Identification No.: _____

Department: _____

Major/Concentration: _____

Committee Chairperson: _____

Working Title of Dissertation: _____

Term: Fall Winter Spring Summer I Summer II Year

Year: 20____

Activity:

(Additional pages may be included)

Signatures:

STUDENT

DATE

DISSERTATION ADVISOR (Print and Sign)

DATE

Progress is: Satisfactory Unsatisfactory

OFFICE OF GRADUATE EDUCATION

DATE

REGISTRAR

DATE

August 25, 2020,

Doctoral_Activity.doc