

DEPARTMENT OF NEUROBIOLOGY MASTER'S PROGRAM

MASTER'S OF SCIENCE DEFENSE APPROVAL

The Master's Program in Neurobiology certifies that

First Name

Middle Initial

Last Name

has presented a satisfactory master's thesis defense to a Neurobiology MS faculty committee.

Thesis title: _____

Typed Name

Signature

Department

Faculty Advisor

Graduate Faculty Committee Member

Graduate Program Representative

Date: _____
(month/date/year)

**Return to: Neurobiology Office, Northwestern University
2205 Tech Drive, Hogan 2-160, Evanston, Illinois 60208**