## Department of Pharmaceutics and Pharmaceutical Chemistry Ph.D. Defense Clearance Form

Student Name:
Important – this form must be signed by both the Graduate Student Advisor and the Department Chairperson <u>before</u> scheduling your defense date. Also, the Chairman of your Supervisory Committee must have read and approved your dissertation <u>before</u> scheduling your defense date.
In scheduling your defense date, please be aware that a spiral bound copy of your dissertation must be submitted to each of your committee members and to the Department Graduate Office at least two weeks before your defense.  Also, the announcement of your dissertation defense must be posted to the Department's seminar mailing list at least two weeks before your defense. The Department Office (301 SKH) can post this announcement for you if you provide a .pdf file to them in time.
PUBLICATIONS:
Please list 2 full, original technical publications from your thesis research for which you are the primary author (typically first author). Listed publications must be submitted, accepted or published by a recognized peer-reviewed journal whose SCI impact factor is published to be > 1.00.
1.
2.
JOURNAL CLUB:
Please list four consecutive semesters that you enrolled in departmental journal club. Also list the title of each journal club.
Journal Club No. 1
Journal Club No. 2
Journal Club No. 3
Journal Club No. 4

## **SEMINARS:**

Please list dates of your departmental seminars. As stated in the departmental guidelines, students are required to present at least two departmental seminars and a podium or poster presentation at a national meeting. In lieu of a national presentation, students may present two podium or poster presentations at local or regional meetings. Podium or poster presentations should be listed as citations (Authors. Presentation Title. Meeting Name. Meeting Date.)

Seminar 1				
Seminar 2				
Seminar 3				
Podium or Poster Presentations				
'				
TEACHING ASSISTANT				
Please include semester, instructor and course:				
_				
PRELIMINARY EXA	MINATION			
Please give the date that you passed your comprehensive exam:				
Please give date that you satisfied all conditions of your preliminary exam:				

Please request a copy of transcripts and schedule a meeting with the Department's Graduate Student Advisor to ensure all required coursework is complete.

All Departmental requirements have been defense.	met; the student is clear to proceed with thesis	3
Graduate Student Advisor	Date	
Department Chair	Date	