

## Oral Research Progress (ORP) Exam Official Committee Appointment Form

Form must be submitted and approved by the beginning of the 4th semester prior to the actual exam

Last Name:		First Name:  MyUH email:  List intended date for the ORP exam:		
MyUH ID: Indicate the Program Division: Anticipated field of Research:				
Semester and year anticipating graduation.		Semester:		ear:
It is requested that the following facul Committee for the above named stude should be (a) At least two (2) from you outside the Department (industry inclu	nt. By signing or division. (b)	below, they have agre	ed to serve.	Selection of members
<u>Print Name</u>	<u>Department/C</u>	HEM-Division/Company	<u>UH ID</u>	Accepted Signature (No digital signature)
Chairperson of the Committee				
Committee Members:				
In-Division Member 1				
In-Division Member 2				
Outside of the Division Member				
Outside of the Department Member				<del></del>
Indicate Approval with Name and Signat	ure below.			
Approved: Research Advisor (Print)			 Dat	e
Approved:			- <del></del>	
Program Chair (Print)	Sign		Dat	e

Upload form to the Drop Folder

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