Student Name (First, M.I., Last): _______________________________________________________________
GW ID: _____________________________ Degree (check one): MS:____, PhD:____, Professional/Applied Scientist:____
E-Mail: _________________________________ Phone Number:_____________________________________

Seminar # 1:
Speaker Name:____________________________________________  Date:_____________________
Talk Title:__________________________________________________________________________
Verified by :
Name:_____________________________________ Signature:________________________________

Seminar # 2:
Speaker Name:____________________________________________  Date:_____________________
Talk Title:__________________________________________________________________________
Verified by :
Name:_____________________________________ Signature:________________________________

Seminar # 3:
Speaker Name:____________________________________________  Date:_____________________
Talk Title:__________________________________________________________________________
Verified by :
Name:_____________________________________ Signature:________________________________

Seminar # 4:
Speaker Name:____________________________________________  Date:_____________________
Talk Title:__________________________________________________________________________
Verified by :
Name:_____________________________________ Signature:________________________________

Seminar # 5:
Speaker Name:____________________________________________  Date:_____________________
Talk Title:__________________________________________________________________________
Verified by :
Name:_____________________________________ Signature:________________________________

Seminar presented by PhD candidate student:
Speaker Name:____________________________________________  Date:_____________________
Talk Title:__________________________________________________________________________
Verified by :
Name:_____________________________________ Signature:________________________________

I hereby endorse that the student named above satisfied the degree requirement of attending at least five sponsored seminars during the course of study for the above degree.

Advisor Name:_____________________________________ Signature:________________________________

Submit completed form to the ECE Department on the 5th Floor of the SEH Building 7/2017