

LITERATURE REVIEW CERTIFICATION FORM
Department of Philosophy Doctoral Program

Student's Name: _____ UO ID# _____

Dissertation Committee (only list the three Philosophy faculty)

(Chair)

(Committee Member)

(Committee Member)

Area of Specialization for the Literature Review: _____

Date of Approval of the Bibliography: _____

Date of Final Approval of the Literature Review: _____
(No later than the end of the third quarter of the candidate's third year of doctoral study)

Committee Signatures

(Chair)

(Committee Member)

(Committee Member)