

**MEETING VERIFICATION WITH COMPS COMMITTEE**

*The University of Georgia  
Department of Sociology*

\_\_\_\_\_  
*Student*

\_\_\_\_\_  
*Date*

**Graduate Program Committee Signatures**

\_\_\_\_\_  
*Major Professor*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Advisory Committee Member*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Advisory Committee Member*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Advisory Committee Member*

\_\_\_\_\_  
*Signature*

**Approval Signature**

\_\_\_\_\_  
*Graduate Coordinator*

\_\_\_\_\_  
*Date*

**\*\*Return this form to the Graduate Coordinator Assistant in Room 113A\*\***