

## Prelim Request Form – Department of Mathematics

*Please complete this form online, and then print and bring it to Marci in 267 Altgeld Hall at least **3 WEEKS BEFORE** your exam date.*

Name \_\_\_\_\_

NetID \_\_\_\_\_ UIN \_\_\_\_\_

**Prelim Committee Members.** Committee must include a minimum of 4 voting members, 3 UIUC graduate faculty, and 2 tenured UIUC graduate faculty.

Name	Net ID
_____ Chair	
_____ Thesis Adviser	

**Attach your Prelim Syllabus.** It must describe the **thesis research proposal** (statement of the problem, known results, possible methods, partial progress) and also the list of examinable topics. For more information, see Chapter 2 of the Graduate Guide. The syllabus is typically 2-4 pages in length.

Prelim Date \_\_\_\_\_ Prelim Time (2-hour block) \_\_\_\_\_

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For office use only

Room for Prelim \_\_\_\_\_

Syllabus and Committee Approved by \_\_\_\_\_  
Yuliy Baryshnikov, Director of Graduate Studies