

University of Washington Graduate School

# Committee Signature Form for Master's Degree

To be kept on file in the student's department

Qtr/Yr	Winter 2023	Date Printed	3/1/2023
Full Name	Anthony Bigelow (Legal Name: Anthony Bigelow)	Student Number	1725514
Department	Neuroscience		
Degree	MASTER OF SCIENCE (NEUROSCIENCE)		Thesis Program

**APPROVED FOR GRADUATION**  
 We, the undersigned recommend that this student be granted this degree (contingent on satisfying any remaining requirements listed below).

**NOT APPROVED FOR GRADUATION**  
 The Examining Committee reports that the candidate has failed to pass a satisfactory examination and is not recommended for graduation.

Examining Committee

Please print names

Signatures

(Chairperson)

ANITHA PASUPATHY

WYETH BAIR

GREG HORWITZ

*(Handwritten signatures of Anitha Pasupathy, Wyeth Bair, and Greg Horwitz)*

Date 3/3/2023

### Minority Dissent

As committee member(s), I(we) wish to dissent from the committee recommendation that the Master's degree be conferred.

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### Graduate School Contingencies:

None

Comments:

**Departmental Contingencies:** (Student's department, list any unfinished departmental requirements.)

No departmental contingencies