

**Doctoral Proposal Defense**

<<ADD PHOTO HERE>>

**<<YOUR NAME>>**

Doctoral Candidate Advisor: Dr. <<ADVISOR NAME>>

Department of Food Science and Human Nutrition Michigan State University

<<“TITLE”>>

<<Day, Month XX, 2023>>

<<11:00 AM–12:00 PM>>

Room 206 Trout Building

OR

ZOOM Meeting ID: XXX (Passcode: XXX)