

Thesis Defense/Dissertation Proposal/Dissertation Defense

Date: 12/6/2016

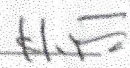
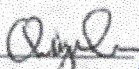


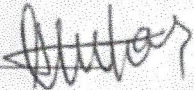

Student name: Syed Alam Abbas

Degree Program: PhD Electrical Engineering

Title: SIGNAL PROCESSING WITH FOURIER ANALYSIS, ALGORITHMS AND APPLICATIONS

Circle one: Thesis Dissertation Proposal Dissertation Defense

Each member of the Research Committee must sign and indicate whether they Strongly Agree, Agree, or Disagree that the Oral presentation and the Written document represents a research effort of sufficient depth for a Thesis/Dissertation Proposal/Dissertation Defense in the ECE MS/PhD program.

| Name | Oral Presentation | | | Written Document | | |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| | SA | A | D | SA | A | D |
| 1) <u>Dr. Hassan Foroosh</u>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) <u>Dr. Qiyu Sun</u>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) <u>Dr. Alexander Katsevich</u>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) <u>Dr. Nazanin Rahnavard</u>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) <u>Dr. Ulas Bagci</u>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) <u>Dr. George Atia</u>  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Committee Recommendation (Pass/Fail): Pass

To Pass, at least the maximum of {3, half the committee members} must Agree or Strongly Agree.