## REQUEST FOR DOCTORAL DISSERTATION COMMITTEE APPROVAL

INSTRUCTIONS: Each dissertation committee must consist of a <u>minimum</u> of 5 individuals. A majority of the committee members must be "regular" members of the graduate faculty (if any doubt, see Carmen or Nancy to determine this). **THIS FORM MUST BE SIGNED BY THE DISSERTATION ADVISOR and/or CHAIRPERSON TO DEMONSTRATE APPROVAL OF THE COMPOSITION OF THE COMMITTEE**. It should then be returned to Carmen or Nancy for processing.

| STUDENT'S NAME:                                  |   |
|--|---|
| DATE:  |   |
| PROPOSED COMMITTEE MEMBER                        | GRADUATE FACULTY STATUS (regular or fixed term) |
| 1  |   |
| 2  |   |
| 3  |   |
| 4  |   |
| 5  |   |
| [Exceeding 5 members is optional.]               |   |
| 6  |   |
| 7  |   |
| ***********                                      | *********                                       |
| PLEASE SIGN:                                     |   |
| The above list has been reviewed with the studen | at and it has my approval.                      |
| Dissertation Advisor:                            |   |
|  |   |
| Committee Chairnerson (if different):            |   |