



Office of Graduate Studies  
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Ph.D. Dissertation  
 Committee

REQUEST:

A. I hereby request the following Dissertation Committee to be established for

\_\_\_\_\_ (Print student's name) \_\_\_\_\_ (UIN)

who is enrolled in the \_\_\_\_\_ program.

DISSERTATION COMMITTEE

NAME (PRINT)

SIGNATURES

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Dissertation Committee Chair

Dissertation Committee Chair

\_\_\_\_\_  
 (Date)

B. I concur with the appointment of the above Dissertation Committee.

\_\_\_\_\_  
 Signature of Student

\_\_\_\_\_  
 (Date)

APPROVAL:

\_\_\_\_\_  
 Graduate Program Director (Date)

\_\_\_\_\_  
 Department Chair (Date)

\_\_\_\_\_  
 Dean College (Date)