

Thesis/Dissertation Committee Appointment Form

Student Information:

Legal Name:

Last

First

Middle

Student ID#: _____

Email: _____

Degree: _____

Program: _____

Type: Thesis Dissertation

Expected Completion Date: _____

Committee Members:

Committee members can serve a variety of roles in the student's project. At a minimum, they attend all committee meetings and offer feedback, read and comment on thesis/dissertation manuscript (if applicable), and attend the defense. Often, they serve as informal advisors and meet with the student as needed. Our signature below indicates our agreement to serve as committee members for the student listed above.

Printed Name	Signature	Department
Committee Chair	_____	_____
Committee Member	_____	_____

Approved By

Program Director, Department Chair, or Dean of
Graduate Program

Signature

Date

Thesis/Dissertation Format Acceptance

The signature below indicates that I agree to adhere by the guidelines outlined in the Thesis/Dissertation Formatting Guide Book. I also agree to submit all forms by the applicable deadlines (posted in the Graduate School calendar) and in the case that I cannot, I will notify the Graduate School in writing.

Student Name (print)

Student Signature

Date

For Graduate School Office Use Only:	
_____ Verified: Graduate Services Specialist	_____ Date