

As required by graduate policy (2.3.1), the following advisory committee is established for the student named on this form.

NAME _____ DATE _____
Last First Middle

FIELD OF STUDY _____ STUDENT ID NO. _____

DEGREE PROGRAM _____ MAJOR CODE _____

TITLE OF DISSERTATION _____

COMMITTEE MEMBER NAME	COMMITTEE MEMBER DEPARTMENT	COMMITTEE MEMBER SIGNATURE
Major Adviser _____ <i>Type / Print Clearly</i>	Academic Unit _____	Signature _____
Outside Member _____ <i>Type / Print Clearly</i>	Academic Unit _____	Signature _____
Other Member _____ <i>Type / Print Clearly</i>	Academic Unit _____	Signature _____
Other Member _____ <i>Type / Print Clearly</i>	Academic Unit _____	Signature _____
Other Member _____ <i>Type / Print Clearly</i>	Academic Unit _____	Signature _____
Other Member _____ <i>Type / Print Clearly</i>	Academic Unit _____	Signature _____

STUDENT SIGNATURE _____ DATE _____

APPROVALS / CONFIRMATION	
APPROVED _____ <i>Academic Unit Head</i>	DATE _____
Document Reviewed _____ <i>Office of Graduate Programs</i>	DATE _____
APPROVED _____ <i>Director, Graduate Programs</i>	DATE _____