

DISSERTATION COMMITTEE APPOINTMENT FORM

Tentative Dissertation Title

Candidate (Print/Type)	Candidate Signature	Student ID
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Candidate Email	Date
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Dissertation

Committee Chair:	<hr/>	<hr/>
	Name	Signature

Co-Chair (if any):	<hr/>	<hr/>
	Name	Signature

Methodologist:	<hr/>	<hr/>
	Name	Signature

Dissertation

Committee Members:	<hr/>	<hr/>
	Name	Signature

<hr/>	<hr/>	<hr/>
	Name	Signature

<hr/>	<hr/>	<hr/>
	Name	Signature

Attach current vita for any non-School of Education committee member.

Approved:

Committee Chair Signature	Date
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Committee Co-Chair Signature	Date
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The Dissertation Committee Chair's signature on the form signifies that the chair has confirmed that each member of the committee has agreed to serve on the committee.

DENIED APPROVED

Doctoral Program Director Signature	Date
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DENIED APPROVED

Associate Dean Signature	Date
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