

APPROVAL OF DOCTORAL GUIDANCE COMMITTEE

Student _____ **PID** _____
(please print name)

Major _____

Minor _____

I have asked the following persons to serve on my doctoral guidance committee.
I hereby request approval of the following committee members.

Major Professor

(please print name)

(address)

(major professor's signature)

Committee Member

(please print name)

(address)

(committee member's signature)

Committee Member

(please print name)

(address)

(committee member's signature)

Committee Member

(please print name)

(address)

(committee member's signature)

Committee Member

(please print name)

(address)

(committee member's signature)

Committee Member

(please print name)

(address)

(committee member's signature)

Student's Signature

Date

Department Chairperson's Signature

Date

cc: Major Professor, Committee Members, Student, and Associate Dean