

DOCTORAL DISSERTATION COMMITTEE APPROVAL FORM

Note: A dissertation committee **must** be approved prior to the Proposal Approval Meeting. When approval is received from the Graduate School, a copy of the form will be provided to all committee members.

Student: _____

Advisor: _____

Proposed Dissertation Title: _____

The Dissertation Director is officially responsible for recommending members of the committee. I have approved the following committee members:

Student Signature: _____ Date: _____

Dissertation Advisor: _____
Director Signature: _____

For Office Use Only
Graduate School Status:
Full/Dissertation Qual: _____
Assoc: _____
Dissertation Qual: _____

Type in committee member's names and affiliation, if outside the Department of Psychology. Your signature below indicates that you have agreed to serve on this Dissertation Committee. Please attach a current Vitae if outside the Department of Psychology.

Member: _____
Member Signature _____
Department/Affiliation _____

For Office Use Only
Graduate School Status:
Full/Dissertation Qual: _____
Assoc: _____
Dissertation Qual: _____

Member: _____
Member Signature _____
Department/Affiliation _____

Full/Dissertation Qual: _____
Assoc: _____
Dissertation Qual: _____

Member: _____
Member Signature _____
Department/Affiliation _____

Full/Dissertation Qual: _____
Assoc: _____
Dissertation Qual: _____

Member: _____
Member Signature _____
Department/Affiliation _____

Full/Dissertation Qual: _____
Assoc: _____
Dissertation Qual: _____

Member: _____
Member Signature _____
Department/Affiliation _____

Full/Dissertation Qual: _____
Assoc: _____
Dissertation Qual: _____

At this point please submit to the Graduate Program Secretary.

Area Leader: _____ Date _____
Graduate Program Director: _____ Date _____
Dean, Science and Mathematics: _____ Date _____
Dean, Graduate School: _____ Date _____