

GRADUATE PETITION TO QUALIFY TO SERVE ON THE DISSERTATION COMMITTEE

STUDENT ID: _____

Student's Name: _____
(Last, First, MI)

Department: _____

Concentration/Emphasis: _____

Degree: _____

Bulletin Year:

Mailing Address: _____

Phone: _____
Email: _____

DISSERTATION TITLE: _____

DESCRIPTION OF THE TOPIC: _____

REQUEST THAT DR: _____

INDICATE INSTITUTIONAL AFFILIATION: _____
(Please attach VITA)

BE ALLOWED TO SERVE ON THE DISSERTATION COMMITTEE.

LIST SPECIFIC EXPERTISE THAT IS RELATED TO THE DISSERTATION TOPIC:

Student Initials:

Date:

Recommended

Academic Advisor

Date

Department Chair/Program Coordinator

Date

Approved

Dean, School of Education

*The graduate Dean's signature is needed for any exceptions to minimum standards voted by the Graduate Council, including exceptions to policies for provisional/regular admission (including English Language standards), normal course loads, residency, degree candidacy and deadlines, time limitations on degrees, credit transfers, second degrees, updating, grade changes, grade-point average requirements, academic probation, comprehensive examinations, projects/theses/dissertations, application for graduation deadlines, etc