

REQUEST FOR CONVENING OF THESIS/DISSERTATION ADVISORY COMMITTEE**I. REQUEST**

A. I hereby request the following Thesis/Dissertation Advisory Committee to be established for

(Print/Type Student's Name)_____
(Student's ID#)

Radford E-Mail: _____

who is enrolled in the _____ program.

(Title of degree program)

Expected Semester of Graduation: _____

Committee Chair _____

(Print)

(Signature)

(Date)

Proposed Topic/Title: _____

Semester(s) and year of registration of thesis/dissertation credits. Include course prefix, course number, and number of credits (i.e., PSYC 699 FA'19 - 3 credits, PSYC 699 SP'120 - 3 credits):

If you need to be dropped from any course(s) once registered for thesis/dissertation credits please list course(s) that need to be dropped here _____

Printed/Typed Names of Committee Members

Signatures

Date

Committee Chair_____
Committee Member_____
Committee Member

B. I concur with the appointment of the above Thesis/Dissertation Advisory Committee.

(Printed/Typed Name of Student)_____
(Signature)_____
Date**II. APPROVALS [REQUIRED PRIOR TO ENROLLING FOR THESIS/DISSERTATION CREDITS]**_____
Graduate Program Director/Department Chair_____
Date_____
Graduate College
(7/23)_____
Date