**Department Approval of Dissertation Committee Chair**

Student:       UID #:

Admitted to the Doctoral Program in School Psychology Admission Year:

Committee Chair:

Tentative Topic:

[ ]  I reviewed the Dissertation Procedures on the Doctorate in School Psychology website.

[ ]  I am requesting an override for PSY 599 for       (semester/year).

Signatures

Please type your legal name to certify that the information submitted is accurate to the best of your knowledge. Please save and email this form as an attachment to the next person on the list after your name.

Student:       Date:

Committee Chair:       Date:

Graduate Coordinator:       Date:

Override processed and student notified to register       (initials and date)