**Department Approval of Dissertation Committee**

Student:       UID #:

Committee Chair or Co-chairs:       Year Admitted:

Committee Member:

Committee Member:

Committee Member:

Committee Member outside the Department:

Email address for this Committee Member:

Outside Member’s Affiliation (ISU department or external to ISU):

Dissertation Title:

Signatures

Student Date

Committee Chair Date

Committee Chair Date

Committee Member Date

Committee Member Date

Committee Member Date

Department Chair Date