REQUEST FOR APPROVAL OF DISSERTATION COMMITTEE -- For use by ES and CSHPE doctoral students

Attach a one-page statement about your proposed dissertation topic to this form; include tentative title of dissertation. This School of Education required form is to ensure that the dissertation committee members who are nominated are appropriate to the dissertation topic. After each committee member has signed the form, the student signs and submits this form to the Office of Student Affairs (Suite 1228) for School of Education review and approvals. Questions? Educational Studies students may contact Betsy Dodge, elbunce@umich.edu or 734-763-1368. Higher Education students may contact Jessica Mason, jessfred@umich.edu or 734-764-8483.

Student Name _____________________________________________________________ UM Student ID Number _____ _____ _____ _____ _____ _____
Program _____ ES _____ CSHPE E-Mail Address ______________________@umich.edu

Please type or print
Signature
Faculty Rank Department
Chair ______________________________________ _________________________________________ _____________________________ ____________________________________________
Co-Chair ______________________________________  _________________________________________  _____________________________ ____________________________________________
Cognate ______________________________________  _________________________________________ _____________________________ ____________________________________________
Member   _____________________________________ _________________________________________   _______________________ _____ ____________________________________________
Member   ______________________________________   __________________________________________  _____________________________  ___________________________________________
Member   ______________________________________    __________________________________________    _____________________________ ___________________________________________

Signature of Student __________________________________________________________ Date _______________________________

SOE PROGRAM AND OSA OFFICE USE
I ___ do ___ do not approve the dissertation committee nominations. ________________________________ Date __________________________

Signature of Program Chair

Committee Eligibility Checked in OSA __________________________________________________________ Date __________________________

Date entered on spreadsheet __________________________  Initials __________

Revised: Office of Student Affairs – September 30, 2014