

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

Office of Graduate Affairs, Assistant Provost Date