

# EAST TENNESSEE STATE UNIVERSITY

## SCHOOL OF GRADUATE STUDIES

### THE APPOINTMENT OF AN ADVISORY COMMITTEE FOR THE DOCTOR OF PHILOSOPHY IN NURSING DEGREE

NAME: \_\_\_\_\_  
Student's Name (please type or print) E#

Admitted to doctoral study in the college of Nursing in the \_\_\_\_\_ semester of \_\_\_\_\_.  
Fall/Spring/Summer (year)

Field of Study: Nursing Science Cognate: \_\_\_\_\_ Degree: PHD

**NOTE:** On admission to the program the student will be assigned a major academic advisor. The major academic advisor will approve the student's program of study and advise the student throughout the coursework and residency activities. At least one semester prior, to the one in which the qualifying exam is taken, the student will establish a graduate advisory committee of his/her choice, consisting of a chair and at least four eligible members. The chair of the committee must be an ETSU College of Nursing graduate faculty member (full or associate); one committee member must be a graduate faculty member from another academic unit within this or another university. The committee will administer and evaluate the qualifying examination and facilitate the student's culminating research project and preparation of the dissertation. The chair of the advisory committee should meet formally with the student at least once each semester to review the student's research progress. The chair of the advisory committee and the Associate Dean of the College of Nursing are responsible for reviewing the student's program of study and ensuring that it fulfills degree requirements.

The members of the student's advisory committee, as indicated below, were designated during a conference with the student on \_\_\_\_\_.  
Date Graduate Coordinator

**Faculty Signatures affixed below constitute acceptance of the advisory committee assignment.**

Committee Names: (Please Type or Print)	Committee Signatures:	Grad Faculty Status and Expiration Date
_____ Chair, Advisory Committee <span style="float: right;">Phone Number</span>	_____ Signature <span style="float: right;">Date</span>	_____
_____ Committee Member <span style="float: right;">Phone Number</span>	_____ Signature <span style="float: right;">Date</span>	_____
_____ Committee Member <span style="float: right;">Phone Number</span>	_____ Signature <span style="float: right;">Date</span>	_____
_____ Committee Member <span style="float: right;">Phone Number</span>	_____ Signature <span style="float: right;">Date</span>	_____
_____ Committee Member <span style="float: right;">Phone Number</span>	_____ Signature <span style="float: right;">Date</span>	_____

**Approved:**

\_\_\_\_\_  
Dean, School of Graduate Studies Date