

**EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES
Dissertation Committee
Ph.D. DEGREE PROGRAM FOR ECED**

NOTE: The student is responsible for scheduling a conference with the chair or doctoral coordinator of his/her department to nominate an advisory committee. It is the responsibility of the student to present this appointment form to the doctoral coordinator and to all committee members for signatures and to file this form with the School of Graduate Studies.

REQUEST:

It is hereby requested that the following Dissertation Committee to be established for

_____ E# _____
(Print student's name)

who is enrolled in the _____ program.

DISSERTATION COMMITTEE

NAME (PRINT)	E#	SIGNATURES
_____	E _____	_____
Dissertation Committee Chair		Dissertation Committee Chair
_____	E _____	_____
_____	E _____	_____
_____	E _____	_____
_____	E _____	_____

_____ Date

I concur with the appointment of the above Dissertation Committee.

Signature of Student

Date

APPROVAL:

Doctoral Program Coordinator

Date

Dean of Clemmer College of Education

Date

Dean of Graduate Studies

Date