

University of North Carolina at Charlotte
College of _____

Appointment of Doctoral Dissertation Committee

Student Information

Student ID Number: 800

Name (print): _____ Degree Program: _____

University address: _____

E-mail/telephone/fax: _____

Home address: _____

Student's Signature: _____

Tentative Dissertation Topic: _____

Dissertation Committee

Chair: _____

(print name, sign, and date)

Dissertation Committee Members:

(print full name)

(professor signature and date)

(print full name)

(professor signature and date)

(print full name)

(professor signature and date)

(print full name)

(professor signature and date)

Graduate Faculty Representative
Appointed by Graduate Dean: _____

(print name, sign, and date)

Coordinator of Graduate Programs/Chair

Dean of Graduate School