

ATTACHMENT 3

EDCI DISSERTATION CHAIR APPOINTMENT FORM

Tentative Dissertation Title

Candidate (Print/Type)

Candidate Signature

Student ID

Candidate Email

Date

Chair: _____

Co-Chair (if any): _____

Approved:

Committee Chair Signature

Date

Committee Co-Chair Signature

Date

DENIED APPROVED

Doctoral Program Chair Signature

Date

DENIED APPROVED

Associate Dean Signature

Date