Graduate School and International Education

UNIVERSITY OF ARKANSAS
DOCTORAL COMMITTEE

Student's Name:_____ID Number: _____

Degree Sought:_____Degree Program: _____

Student's Signature:_____Date: _____
(*signature*)

☐ Check if for Doctoral Advisory Committee, which evaluates the student's preparation and fitness for graduate study at the doctoral level, develops the student's program of study, monitors progress in the program, and typically administers the candidacy exam.

☐ Check if for Doctoral Dissertation Committee, which is responsible for insuring that the dissertation contributes new knowledge of fundamental importance, or significantly modifies, amplifies, or interprets existing knowledge in a new and important manner.

The Graduate School requires a minimum of three committee members where the chair has group I and each member have group I or II graduate faculty status. Department programs may have additional requirements.

Committee Members
(Please type or print **FULL NAME**. Example: Jane R. Doe.)
(Please **NOTE** if ex-officio or off campus.*)

_____**CHAIR**	_____
*Please **PRINT** full name*	*signature**
_____	_____
*Please **PRINT** full name*	*signature**
_____	_____
*Please **PRINT** full name*	*signature**
_____	_____
*Please **PRINT** full name*	*signature**
_____	_____
*Please **PRINT** full name*	*signature**
_____	_____
*Please **PRINT** full name*	*signature**

Department Chair/Head
or Program Director:_____Date: _____
(*signature*)

Approved:_____Date: _____
Office of the Graduate Dean

This form is to be submitted to the Graduate School as soon as the committee has been selected. Changes to the committee must be done in accordance with Graduate School rules and require the approval of Graduate School. * Signatures are not required for ex officio or off campus faculty

Original: Graduate School
xc: Department/Degree Program

Revised: 08/17/2015