

Committee Approval Form

_____ Date

Associate Dean
The Graduate School
127 Allen Building
Duke University

Approval is requested for the following advisory committee for

_____ in the Department of _____

for the (preliminary) (final) examination for the (A.M., M.S., Ph.D.) degree:

Professor's Full Name	Rank/Title	Department
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(chair)

(minor area representative)

The above listing is (check one):

_____ the original committee request.

_____ a change in the student's previously approved committee.

We understand that members of a graduate student's advisory committee must be approved for graduate instruction or graduate faculty, and that any committee member now on the faculty of another institution should be a member of that institution's graduate faculty. The institution's name is listed for any non-Duke member.

_____ Director of Graduate Studies

Approved: _____ Associate Dean

_____ Date