Dissertation Advisory Committee Appointment: Form D-3

To be filed within 6 months of successful completion of the Candidacy Examination

The committee must consist of at least five members, at least three of whom must be currently tenured or tenure-track Drexel faculty members. At least two of the committee members must be from outside of student’s primary specialization area. At least one of the committee members must be from outside of student’s department, preferably from outside the university. Effectively September 1, 2008, full-time non-tenure track Research Faculties are also eligible to serve on the Dissertation Advisory Committee, including as the Committee Chair.

<table>
<thead>
<tr>
<th>Student Information</th>
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<tbody>
<tr>
<td>Name of Student:</td>
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<tr>
<td>Student ID Number:</td>
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<tr>
<td>Drexel E-mail Address:</td>
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</tbody>
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Appointment of the following persons to serve on the Ph.D. Advisory Committee is hereby requested:

1. **(Dissertation Chair)** ___________________________ Department ______________________
2. _______________________________________________ Department ______________________
3. _______________________________________________ Department ______________________
4. _______________________________________________ Department ______________________
5. _______________________________________________ Department ______________________
6. _______________________________________________ Department ______________________

<table>
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<tr>
<th>Authorizations</th>
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<td>Student ___________________________ Date ___________________________</td>
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**Dissertation Advisory Committee**

Each committee member must sign here to show willingness to serve.

1. **(Dissertation Chair/Supervising Professor)** ___________________________ ______________________
2. **Co-Supervising Professor (if applicable)** ___________________________ ______________________
3. **Member** ___________________________ ___________________________ ______________________
4. **Member** ___________________________ ___________________________ ______________________
5. **Member** ___________________________ ___________________________ ______________________
6. **Member** ___________________________ ___________________________ ______________________
7. **Member** ___________________________ ___________________________ ______________________

Department Graduate Advisor ___________________________ Date: ___________________________

Office of Graduate Studies: ___________________________ Date: ___________________________