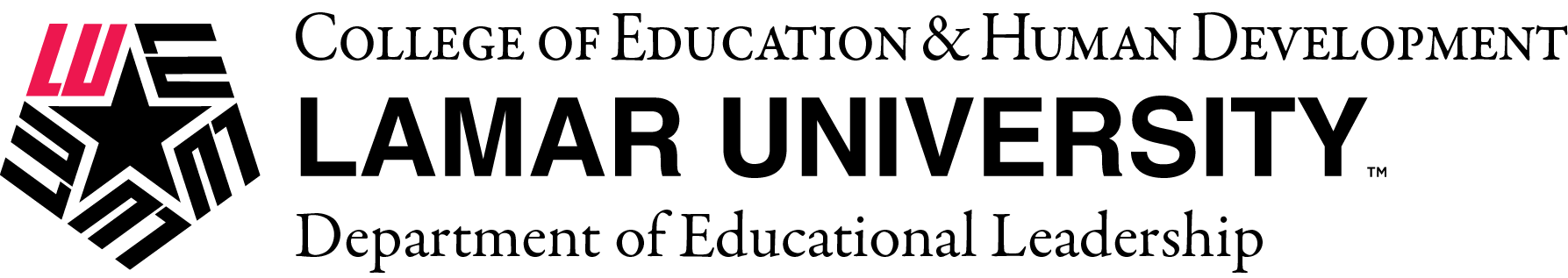
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**APPOINTMENT OF DOCTORAL DISSERTATION COMMITTEE**

*Name:* Click here-type name (Last Name First) *Student ID:* Click here-type number

*Address:* Click here-type address *City, State, Zip:* Click-City, State Zip

*Telephone:* Click here to enter text. *Email:* Click here to enter text.

*Proposed Title of Dissertation:* Click here to enter text.

*Required Signatures:*

Student: click here-type name

Chair: click here-type name

Committee Member: click here-type name

Committee Member: click here-type name

Director, Doctoral Program Date:

Chair, Educational Leadership

Dean, College of Education

Dean, College of Graduate Studies: Date: