

**REQUEST FOR CONVENING OF THESIS/DISSERTATION ADVISORY COMMITTEE**

**I. REQUEST**

A. I hereby request the following Thesis/Dissertation Advisory Committee to be established for

\_\_\_\_\_ (Print/Type Student's Name) \_\_\_\_\_ (Student's ID#)

Radford E-Mail: \_\_\_\_\_

who is enrolled in the \_\_\_\_\_ program.  
(Title of degree program)

Expected Semester of Graduation: \_\_\_\_\_

Committee Chair \_\_\_\_\_ (Print) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)

Proposed Topic/Title: \_\_\_\_\_

Semester(s) and year of registration of thesis/dissertation credits. Include course prefix, course number, and number of credits (i.e., PSYC 699 FA'19 - 3 credits, PSYC 699 SP'120 - 3 credits):

If you need to be dropped from any course(s) once registered for thesis/dissertation credits please list course(s) that need to be dropped here \_\_\_\_\_

Printed/Typed Names of Committee Members	Signatures	Date
Committee Chair	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____

B. I concur with the appointment of the above Thesis/Dissertation Advisory Committee.

\_\_\_\_\_ (Printed/Typed Name of Student) \_\_\_\_\_ (Signature) \_\_\_\_\_ Date

**II. APPROVALS [REQUIRED PRIOR TO ENROLLING FOR THESIS/DISSERTATION CREDITS]**

\_\_\_\_\_  
Graduate Program Director/Department Chair Date

\_\_\_\_\_  
Graduate College (7/19) Date