

Name

Department

SSN/EMPL

Dissertation committees must be in place and approved by the Graduate Program Coordinator, the Department Chair/Director, and the CAS Dean of Graduate Studies before a student is admitted into candidacy status. A copy of this form should be included in the student's file, once all signatures have been obtained.

Committee Composition:

- Chair (*Requirements: regular* department faculty, terminal degree*)
- Minimum of four committee members (*Requirements: terminal degree or appropriate discipline recognition*)
- At least three must be regular* faculty in student's department
- At least one must be from outside the student's department
- Majority UCF faculty

**Regular department faculty are tenured or tenure earning faculty or research faculty with permanent appointments; and can include joint appointments but not courtesy joint appointments*

Dean's Office Use Only			
Criteria Met:			
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

The following individuals agree to serve on this thesis committee (*Please indicate if there is a co-chair.*):

Committee Chair (required):

Signature
Department/Program: _____

Printed Name
Title: _____ Degree: _____ Date

Department Committee Members (required):

Signature
Department/Program: _____

Printed Name
Title: _____ Degree: _____ Date

Signature
Department/Program: _____

Printed Name
Title: _____ Degree: _____ Date

Outside Committee Member (required):

Signature
Department/Program: _____

Printed Name
Title: _____ Degree: _____ Date

Other Committee Members (optional):

Signature
Department/Program: _____

Printed Name
Title: _____ Degree: _____ Date

Signature
Department/Program: _____

Printed Name
Title: _____ Degree: _____ Date

The following individuals approve of the committee membership indicated above:

Student's Signature

Student's Printed Name Date

Program Coordinator's Signature

Program Coordinator's Printed Name Date

Department Chair's Signature

Department Chair's Printed Name Date

College Dean's Signature

College Dean's Printed Name Date