

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 _____
Student's Name

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

<u>Professor's Full Name</u>	<u>Rank/Title</u>	<u>Department</u>
(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

