

Request for Approval of Doctoral Committee

- Original
- Revision

Date _____

Name _____

Degree Program _____

Please Print Names below:

_____, Chair

_____, Major Area

_____, Music

*For Outside Member, please include Title, Department & Email

_____, Outside Member

Title: _____

College/Department: _____

PO BOX: _____

Email: _____

_____, Director of Graduate Studies

_____, Date Approved