

Approval of Thesis or Dissertation Committee**Thesis Dissertation**Name: _____ Student ID #: _____
Last First M.I.

Academic Department: _____ Academic Program: _____

Anticipated Date of Completion: _____

Title/Topic of Research: _____

AuthorizationsCommittee Chair: _____
*Printed Name University ID Signature Date*Committee Member: _____
*Printed Name University ID Signature Date*Committee Member: _____
*Printed Name University ID Signature Date*Committee Member: _____
*Printed Name University ID Signature Date*Committee Member: _____
*Printed Name University ID Signature Date*Department Chair: _____
*Printed Name Signature Date*Academic Dean: _____
Printed Name Signature Date

Committee must include a minimum of three members of the graduate faculty, no more than one of whom may be a non-tenure track faculty member. Doctoral committees must include one member from outside the student's major area.

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