

**College of Graduate and Professional Studies  
Indiana State University  
Terre Haute, Indiana**

APPROVAL OF DISSERTATION COMMITTEE

Name \_\_\_\_\_ Student ID \_\_\_\_\_  
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Field of Specialization for Ph.D. \_\_\_\_\_

Approved by: \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Committee Member \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Committee Chair \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Department Chair \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Academic Dean \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

College of Graduate and Professional Studies Dean \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

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Please submit this form to the Department Chair, Academic Dean, and College of Graduate and Professional Studies in that order.

Distribution: Committee Chairperson, Student, Academic Dean, Department Chairperson, and the College of Graduate and Professional Studies