



**Request for Approval of PhD Examination Committee**

Student Name:	
Program:	

**Examination committees must include 3 full-time Dartmouth faculty members of which a minimum of two must be from the student’s graduate program (including the Dissertation advisor) as well as an external member with a faculty-equivalent research appointment outside of Dartmouth College. The external member may participate in meetings in person or via video conference.**

Committee Member #1 Full-time Dartmouth faculty member with faculty appointment in your program

Dissertation Advisor:	
Department:	
Advisor Title:	

*(Professor, Associate, Assistant, Adjunct, etc.)*

Committee Member #2 Full-time Dartmouth faculty member with faculty appointment in your program

Dissertation Advisor:	
Department:	
Faculty Title:	

*(Professor, Associate, Assistant, Adjunct, etc.)*

Committee Member #3 Full-time Dartmouth faculty member (inside or outside your program)

Dissertation Advisor:	
Department:	
Academic Institution:	
Faculty Title:	

*(Professor, Associate, Assistant, Adjunct, etc.)*

Committee Member #4 Full-time Dartmouth faculty member (inside or outside your program)

Dissertation Advisor:	
Department:	
Academic Institution:	
Faculty Title:	

*(Professor, Associate, Assistant, Adjunct, etc.)*

*Approval Signatures:*

_____	Advisor	_____	Date
_____	Graduate Chair	_____	Date
_____	Guarini School	_____	Date

This form is required by the Guarini School of Graduate Studies. After completing and securing advisor and Graduate Chair signatures, please return to the department office for transmittal to the Guarini School.