

Research Doctoral Committee Appointment Signature Form (Ph.D.)

Office of Graduate Enrollment Services, The Pennsylvania State University, 114 Kern Graduate Building, University Park, PA 16802-3396; 814-865-1795;
gesrecords@psu.edu

Detailed information on Research Doctoral Committee Composition and Doctoral Committee Responsibilities can be found in the Graduate Education Policies under [GCAC-602 Research Degree Policies - Doctoral](#).

As per GCAC-602, the committee must be appointed no later than one calendar year following the date of the student's successful completion of the Qualifying Examination.

The committee must be validated and on record with the J. Jeffrey and Ann Marie Fox Graduate School **at least two weeks prior** to the date of the comprehensive and final oral examinations.

If the composition of the doctoral committee changes, a revised committee appointment signature form must be submitted to the Office of Graduate Enrollment Services **as soon as possible**. All members of a revised committee must be listed on the form.

***Check Committee Type:** **New**
Revised

***Student's Name**

***9-digit Penn State ID**

***Degree (Ph.D.)**

***Student's Major Program**

Dual-Title Program (if applicable)

Minor (if applicable)

As the student/chair/committee member, I have carefully read and understand the policies and procedures and agree to adhere to these policies and to serve as a member of the doctoral committee for the student specified (for applicable signatories), if officially appointed by the Fox Graduate School.

***Student:**

Signature

Date

***Chair / Co-chair:**

(Must be a member of the major program)

Printed Name

Signature

Date

Chair / Co-chair,

(If applicable):

Printed Name

Signature

Date

***Dissertation**

Adviser/Co-adviser:

(Identify and sign even if signing elsewhere on form)

Printed Name

Signature

Date

Dissertation

Adviser/Co-adviser:

(If applicable - identify and sign even if signing elsewhere on form)

Printed Name

Signature

Date

Major Program

Member(s):

(In addition to the chair or co-chair; must be in student's major field of study)

Printed Name

Signature

Date



Printed Name

Signature

Date

Printed Name

Signature

Date

***Outside Field Member:**

Printed Name

Signature

Date

***The field you represent (outside
the student's major field of study):**

**Additional Outside
Field Member:**

Printed Name

Signature

Date

***Outside Unit Member:**

Printed Name

Signature

Date

***The Outside Unit Member's Administrative Unit, as indicated in GPMS, must be different than the Chair(s) and Dissertation Adviser(s)**

Minor Field Member(s):

(If applicable)

Printed Name

Signature

Date

Printed Name

Signature

Date

Special Member(s):

(If applicable)

Printed Name

Signature

Date

Printed Name

Signature

Date

***Name and signature of Graduate Program Head/Chair, Director of Graduate Studies, or Professor-in-Charge verifying the above information:**

Printed Name

Signature

Date

*** Required Field**