FORMATION OF DISSERTATION COMMITTEE FORM

Name (Please Print) Argosy University ID Number		Program Concentration
		Anticipated Graduation Date
Disserta	tion Working Title	
	Submission of this form indicates that you with no "in	complete" (I) or "in progress" (IP) grades
	Completed E7834 (Writing for Research) with a passing	ng grade of B or better
	Enrolled in E7935 (Dissertation I) for the next semester	
	Met with your Academic Advisor to discuss the Proposal Outline and four (4) prospective dissertation members	
	Requested a vita and transcript from off-campus committee member (second or third reader only)	
	Obtained signatures of all Dissertation Committee members	
	Please attach to this form:	
	A copy of your dissertation Proposal Outline	
	Vita and transcript for off-campus reader, if applicable	
	Have each committee member sign this form	
	Committee Chair, Name	Name, First Reader
	Name, Second Reader	Third Reader (optional)
	Approval of Department Head	Date
	Approval of Dean	