

**REQUEST FOR APPOINTMENT OF PERMANENT Ph.D. COMMITTEE**

DATE SUBMITTED \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

LU ID \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_

**PROPOSED COMMITTEE**

SUPERVISOR: \_\_\_\_\_  
NAME (Print or Type)

\_\_\_\_\_  
SIGNATURE

MEMBER \_\_\_\_\_

\_\_\_\_\_

MEMBER \_\_\_\_\_

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MEMBER \_\_\_\_\_

\_\_\_\_\_

MEMBER \_\_\_\_\_  
(Dean of Graduate Studies nominee)

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DEPARTMENT OF CHEMICAL ENGINEERING CHAIR

DATE \_\_\_\_\_

\_\_\_\_\_  
DEAN OF COLLEGE OF ENGINEERING

DATE \_\_\_\_\_

\_\_\_\_\_  
DEAN OF GRADUATE STUDIES

DATE \_\_\_\_\_