501 Carnell Hall 1803 North Broad Street Philadelphia, PA 19122-6095

Fax: 1-8781



Instructions: Complete this form and attach the nominee's current curriculum vitae (CV). Forward to the Graduate School after obtaining the appropriate signatures.

SECTION I: STUDENT INFORMA	ATION			
Name (Last, First and Middle)		TUid		
Current Mailing Address (including City, S	State and Zip Code)			
Home Telephone	Temple E-mail Anticipated D		Defense Date	
( ) -				
Title of Dissertation Proposal				
SECTION II: IDENTIFICATION O	F DOCTORAL COMMITT	EE NOMINEE		
Name of Nominee Requested Role				
Nominee's Expertise Relating to This Dis	☐ Advisory Commi	ttee Member	der for Dissertation Defense	
SECTION III: ENDORSEMENT O	F NOMINEE'S PARTICIP	ATION		
School/College	Departmen	Department/Program		
I/We hereby certify by signing below department/program identified above		definition of "graduate faculty"	established for the	
Signature of Advisor	Name of A	dvisor	Date	
Signature of Graduate/Department Chair	Name of G	raduate/Department Chair	/ / / Date	
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Signature of Assistant/Associate Dean	Name of A	ssistant/Associate Dean	Date	
			1 1	
SECTION IV: GRADUATE SCHO	OL APPROVAL			
☐ Approved Signature of the Dean			Date	
☐ Denied			1 1	
·		Datum co	empleted form to:	
FOR ADMINISTRATIVE USE ONLY  Christa Viol			•	
☐ DACC Updated		Coordinate Graduate	or of Graduate Student Services	