

Committee Approval Request Individual Student Committee

This form should be completed when an academic unit requests special approval for qualified individuals to serve on Master's or Doctoral supervisory committees. For information regarding eligibility to serve on supervisory committees please reference the Graduate College Policies or contact Graduate Enrollment Services.

Please complete all information below and submit with the nominee's Curriculum Vitae to Graduate Enrollment Services, Mail Code 1003, or via email to grad-ges@asu.edu.

Committee Nominee Biographical Information:

NOMINEE NAME	DATE OF BIRTH	10 DIGIT ASU AFFILIATE ID#
EMAIL ADDRESS	CURRENT JOB TITLE	

Master's or Doctoral Student Information:

STUDENT NAME	10 DIGIT ASU AFFILIATE ID#
EMAIL ADDRESS	STUDENT PLAN CODE
NOMINEE WILL SERVE AS:	
<input type="checkbox"/> Chair <input type="checkbox"/> Co-Chair <input type="checkbox"/> Member	

Approval:

APPROVAL OF THE HEAD OF THE ACADEMIC UNIT NAME _____ SIGNATURE _____	DATE _____
APPROVAL OF THE GRADUATE COLLEGE NAME _____ SIGNATURE _____	DATE _____

Submit completed form along with the nominee's Curriculum Vitae to Graduate Enrollment Services, Mail Code 1003, or via email to grad-ges@asu.edu.