Midwestern State University
Dr. Billie Doris McAda Graduate School

APPENDIX B. Appointment of Dissertation Course Chair and Committee

It is the responsibility of the Dissertation Course Chair to return this completed form to McAda Graduate School prior to the student enrolling in the first dissertation course. All requested information must be provided.

Candidate Information

Name: _____

Email: _____

Degree Program and Concentration: _____

Proposed Term/Year of Enrollment in Dissertation Course: □ Fall □ Spring □ Summer _____

Proposed Title of Dissertation in Practice Project: _____

_____

_____

Approvals

| | | |
|---|---|---|
| Committee Chair Printed Name | Signature | Date |
| Committee Member Printed Name | Signature | Date |
| Committee Member Printed Name | Signature | Date |
| Committee Member Printed Name (if applicable) | Signature | Date |
| Department Chair Printed Name | Signature | Date |
| College Dean Printed Name | Signature | Date |