ALABAMA A&M UNIVERSITY

School Of Graduate Studies

Post Office Box 998 Normal, Alabama 35762 Telephone (256) 372-5266

ADVISORY COMMITTEE THESIS DISSERTATION APPOINTMENT REQUEST

TO: School of Gradua	te Studies	Date:
FROM:	C	nair, Committee (Advisor)
Name of the Student:		
Degree:		
		y members be approved to serve as the Graduate. Each has been contacted and has agreed to serve.
Chair (or Co-Chair) _		
	Name	Signature
Members: _		
	Name	Signature
_	Name	Signature
Recommendation:		Date
	Chairperson, Acade	mic Department
APPROVED:	Dean, School of Gra	Date Iduate Studies