

## SPH Doctoral Dissertation Committee Nomination and Change Form

## I. INSTRUCTIONS

Doctoral candidates work with their faculty advisor to nominate Dissertation Committee Members and a Committee Chair. The committee includes three members, two of whom hold primary faculty appointments in the SPH, and one of whom must be from the student's concentration. The Dissertation Committee Chair must hold a primary appointment in the SPH and is typically a faculty member in the student's concentration. In some cases, more than three committee members are approved. If a doctoral candidate proposes a committee member who does not hold an SPH primary appointment, a CV must be submitted, and the nominee must hold a terminal degree and work in a public health field. If a request is made to later change committee membership, a revised form must be submitted. Students should submit the completed form to the SPH Doctoral Program Committee via email to <a href="mailto:Tracey.Wilson@downstate.edu">Tracey.Wilson@downstate.edu</a> with subject line "Dissertation Committee Nomination Form". Approvals regarding the proposed committee and/or committee change will be emailed to the student and faculty advisor.

II. STUDENT INFO	RMATION			
Student Name:				
Student ID #:				
Concentration:				
III. DISSERTATION	TOPIC AREA			
Briefly describe your dissertat topic. If this is a revised form, indicate any changes to the to Please provide any available details on the population, outcome variable(s), and studdesign(s).	opic.			
		TEE MEMBERS - DHSU SPH FACULTY		
If requesting more than three	e committee members, ple	ease use additional pages and included a justific Title and Department:	cation for the request.  Committee Chair (select one)	
Committee member:	ivanie.	The and Department.	Committee chair (select one)	
Committee member:				
Committee member:				
committee member.				
V. PROPOSED CON	MMITTEE MEMBER – E	EXTERNAL MEMBERSHIP		
	Name:	Title, Department, and Affiliation	Title, Department, and Affiliation:	
ILE Committee member:				
For any proposed member w information below on the exp		ry appointment in the DHSU SPH, please submit member will contribute:	a CV for the candidate and provide	
VI. FACULTY ADVIS	OR AND DOCTORAL	STUDENT SIGNATURES		
Student signature and date:				
Faculty advisor signature and date:				
To be completed both - Oh ' C	the CDII Dectoral Process			
To be completed by the Chair of  ILE Progress Review Out		ommittee:  Requires additional revision:		