

DOCTORAL SUPERVISORY COMMITTEE FORM

Forms must be submitted to gradstudies@jou.ufl.edu for processing

Student Name: _____ UFID: _____

Minor (if applicable) _____ Anticipated term of graduation: _____

Committee Formation Guidelines

Each student's committee will be composed of at least four members. Two members (including the chair) must come from inside the college; at least one member must come from outside the college. If a committee member is not on Graduate Faculty, they will be considered a "special" member and a current vitae (along with a statement explaining how the member's knowledge/expertise is relevant to the student's research) must accompany this form. Special members MAY NOT serve as the chair, co-chair, or external member. See additional guidelines in the Graduate Division's Handbook.

NOTE: The chair of this committee serves as your academic advisor.

Committee Signatures

Committee Chair Name	Signature	Date Signed
Co-Chair Name (if applicable)	Signature	Date Signed
Committee Member Name	Signature	Date Signed
Committee Member Name	Signature	Date Signed
Committee Member Name	Signature	Date Signed
EXTERNAL Member Name and Email Address	Signature	Date Signed

Program Approvals

Associate Dean Name	Signature	Date Signed
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