

Office of Graduate Studies TCU Box 297900 Fort Worth, TX 76129 817. 257.7661

## NOMINATION FOR SPECIAL MEMBERSHIP ON THE DISSERTATION/THESIS COMMITTEE

Please see the guidelines for dissertation/thesis committee service. In general all criteria noted in guidelines MUST be met.

Student Name	TCU ID #
Program	Defense Date if Known
Name and Title of Special Member b	peing nominated:
Individuals not employed by Texas Christian Univ	BERSHIP ON THE DISSERTATION/THESIS COMMITTEE rersity, and who may or may not hold an academic appointment, ubmitting the following form and additional information. Approval, prior to invitation to serve on the committee.
noted expert in the field of study as demonstra	e to contribute in the area of research. He/she should be a ated by publications within the field of the dissertation/thesis, or committee member must hold a terminal degree.
<ol> <li>This completed form with the appropriate the dissertation/thesis topic</li> <li>Vita or resume of the nominee</li> </ol>	e signatures and explanation of the nominee's expertise in
Please describe the nominee's expertise in additional documentation if necessary.	the dissertation/thesis topic in the space below. Attach
dudinonal docomenianon il necessary.	
Chair Signature/Name Printed Date	Associate Dean, College of Education/Name Printed Date