

Graduate College

**Recommendation of Dissertation Committee
to the Dean of the Graduate College**

Initial Committee

Revised Committee

To be completed by the Committee Chair in consultation with the student

NAME: _____ NAU ID: _____

NAU EMAIL: _____ DEGREE/PROGRAM: _____

This form should be submitted for approval as soon as the committee has been identified, well in advance of the prospectus hearing. Please see the [timeline of milestones](#). If the roles or make-up of the committee change at any point, a resubmission of this form must be completed (mark "Revised Committee" above); failure to resubmit this form could delay the student in meeting the milestones for the degree.

Instructions and Important Points to Consider/Include:

- The committee chair must be full-time faculty employed by the student's department. One other member must be faculty from the same department. At least one of the remaining two members must be from outside the department. Any additional members beyond the required number is optional. Please attach the CV of any committee members not employed as faculty at NAU. Please see the academic [policy](#) for details.
- Attach a 2-3-page summary of the proposed dissertation topic.
These summaries should at least include:
 - A detailed explanation of the scope and purpose of the project.
 - Qualitative and/or quantitative methodologies to be used to acquire data.
 - Potential implication for the field.
 - A preliminary list of source material that may be used to acquire information throughout the development of the dissertation.
 - Research involving human subjects requires [IRB](#) review prior to data collection; please indicate in the summary that IRB approval will be sought before collecting data, if applicable.
- The committee chair is responsible for reviewing and approving this form and the summary before submission. The department chair or graduate coordinator must endorse this form and the summary before submission to the Graduate College: etd@nau.edu

Dissertation Title or Topic: _____

Members:

1. _____ Chair Co-Chair Member Terminal Degree

Expertise related to dissertation: _____

Brief description to fit on line

2. _____ Chair Co-Chair Member Terminal Degree

Expertise related to dissertation: _____

3. _____ Chair Co-Chair Member Terminal Degree

Expertise related to dissertation: _____

4. _____ Chair Co-Chair Member Terminal Degree

Expertise related to dissertation: _____

5. _____ Chair Co-Chair Member Terminal Degree

Expertise related to dissertation: _____

Signing and checking the boxes below indicates that:

1. This form and summary are approved and endorsed.
2. Potential conflicts of interest (e.g., committee members who stand to gain from specific results of the study or who may be relatives, friends, employers, or peers of the student) have been addressed. If an unavoidable conflict is identified, continued participation by the committee member requires approval of the dissertation committee chair(s), and a written plan to manage the conflict must be submitted to the Graduate College.

Dissertation Chair/Co-Chair Signature: _____ Date: _____

By checking this box, I verify I have electronically signed and approve this document.

Dissertation Co-Chair Signature: _____ Date: _____

By checking this box, I verify I have electronically signed and approve this document.

Department Chair Signature: _____ Date: _____

By checking this box, I verify I have electronically signed and approve this document.

Graduate College Use Only:

Graduate College Approval: _____ Date: _____

Revised: 8/01/2021