

# Registrar Services

## Dissertation Committee

Personal Information	
Matriculation N°	
Family Name	
First Name	
Field	

Dissertation Committee Members	
<b>PhD Advisor</b>	
Field of Research	internal   external
<b>2nd Committee Member</b>	
Field of Research	internal   external
<b>3rd Committee Member</b>	
Field of Research	internal   external
<b>4th Committee Member</b>	
Field of Research	internal   external
<b>5th Committee Member</b>	
Field of Research	internal   external

Student's Signature	
I hereby request that the faculty and external members named under Dissertation Committee Members become official members of my Dissertation Committee.	
Date	Signature

Committee Members' Signatures	
I agree on being a member of the above-named student's Dissertation Committee.	
Date	1 <sup>st</sup> Committee Member's Signature
Date	2 <sup>nd</sup> Committee Member's Signature
Date	3 <sup>rd</sup> Committee Member's Signature
Date	4 <sup>th</sup> Committee Member's Signature
Date	5 <sup>th</sup> Committee Member's Signature

Dean's Signature	
I hereby confirm that I approve the Dissertation Committee of the above-named student.	
Date	Signature