



STEPHEN F. AUSTIN
STATE UNIVERSITY

James I. Perkins
College of Education

APPOINTMENT OF DISSERTATION CHAIR

Student Name: _____

Campus ID (CID): _____

Major/Concentration: _____

Degree: _____

Student Signature: _____

Date: _____

Proposed Title of Dissertation:

Dissertation Chair:	Signature:	Academic Unit:	Rank:	Graduate Faculty Status:
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_____ Name, Chair	_____	_____	_____	_____
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_____ Name, Co-Chair	_____	_____	_____	_____
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_____ Program Coordinator	_____		_____ Date	
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_____ Academic Unit Head	_____		_____ Date	
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_____ Dr. Judy A. Abbott Dean	_____		_____ Date	
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Email to PCOE Graduate Studies Coordinator at coegrad@sfasu.edu