



Washington University in St. Louis

GRADUATE SCHOOL OF ARTS & SCIENCES

Dissertation Defense Committee

Student _____
Last Name First Name ID

Degree Program _____

Please indicate which one of the committee members listed below is the student's advisor and chair of the defense committee. Also, if the committee has a co-chair, please identify.

A. Washington University faculty (Four of the five committee members must be tenured or tenure-track WU faculty members. One of those four may be Emeritus. Please specify titles.)

From the student's program:

1 _____

2 _____

3 _____

From inside or outside the student's program (please specify title and department):

4 _____

B. The 5th member must be from outside of the student's program. If any member listed from #1 to #4 is not WU tenured or tenure-track, then this member must be. Otherwise, this member may be WU tenured or tenure-track, or may be a WU research professor or lecturer, a professor from another university, or a scholar from the private sector or government (must hold a doctorate and maintain an active research program. Please specify title and department and/or employer):

5 _____

Qualifications (if not WU tenured or tenure-track)

C. Optional additional member:

6 _____

Qualifications (if not WU tenured or tenure-track)

Submitted by Director of Graduate Studies:

Name Signature Date

PLEASE SCAN AND EMAIL TO: DIANA HILL MITCHELL

dhmitchell@wustl.edu

SUBJECT: Dissertation Defense Committee Form

Effective 7/29/15