

**UNIVERSITY OF SOUTH FLORIDA**

**GRADUATE STUDENT SUPERVISORY COMMITTEE APPOINTMENT FORM  
NEW APPOINTMENT**

*Please type or print all information, except where noted for signature.*

**PART I. STUDENT AND DEGREE INFORMATION**

<b>Name</b>		<b>USF ID#</b>	
<b>Street Address</b>		<b>City, State, Zip</b>	
<b>E-mail Address</b>		<b>Phone</b>	
<b>College</b>		<b>Department (abbreviate)</b>	
<b>Graduate Program</b>		<b>Department Mail Code</b>	
<b>Entered Degree Program (e.g., Fall 2000)</b>		<b>Degree Sought</b>	

**PART II. COMMITTEE INFORMATION**

**Master/Ed.S. Committees:**

3 committee members required  
CV required for any non-USF Faculty

**Doctoral Committees:**

4 committee members required  
CV required for any non-USF Faculty  
CV required for all (Co-)Major Professor(s)

	<b>Full Name</b>	<b>Signature of Approval</b> All members must sign for themselves.	<b>Dept. (abbreviate)</b>	<b>Date Signed</b>
<input type="checkbox"/> <b>Major Professor*</b>				
<input type="checkbox"/> <b>Co-Major Professor*</b>				
<input type="checkbox"/> <b>Co-Major Professor*</b>				
<input type="checkbox"/> <b>Member</b>				
<b>Member</b>				
<b>Member</b>				
<b>Member</b>				
<b>Member</b>				
<b>Member</b>				

**PART III. APPROVALS**

	<b>Full Name</b>	<b>Signature of Approval</b>	<b>Date Signed</b>
<b>Dept. Chairperson (or Program Director for Interdisciplinary Education ONLY)</b>			
<b>College Associate Dean</b>			