DATE: __________________

I. INFORMATION

STUDENT: ____________________________________________________________  _______________
(Student Name)  (ID #)

STUDENT EMAIL: __________________________________________________________

DISSERTATION TITLE: __________________________________________________________

DATE OF DISSERTATION DEFENSE PRESENTATION: ________________________________

LOCATION OF DISSERTATION DEFENSE PRESENTATION: __________________________

As Dissertation Chair, my signature below certifies that the aforementioned student has submitted or
published at least 3 first author peer reviewed journal papers. A copy of the student’s complete
ISSTBE flight plan, which lists the publications and other research activity must be submitted with this
form to the program directors.

SIGNATURE: __________________________________________________________________________

Dissertation Committee Chair, BE Department

If the aforementioned student has not met the publication requirement, please do not sign above and
attach a list of the student’s current publications and explain future plans for publication.
II. CONSTITUENCY OF DISSERTATION COMMITTEE

The following individuals are members of the ISSTBE Dissertation Committee for the aforementioned doctoral student. Any individual listed below that serves as a co-advisor to the student is indicated below. Each person has been contacted and has previously signed the appointment to dissertation committee form. Each individual has a graduate faculty appointment in their respective department listed below.

1. __________________________, __________________________, __________________________
   Name of Dissertation Committee Chair
   Dept. sponsoring Graduate Faculty Appointment
   Role (primary advisor, co-advisor, or member)

2. __________________________, __________________________, __________________________
   Name
   Dept. sponsoring Graduate Faculty Appointment
   Role (primary advisor, co-advisor, or member)

3. __________________________, __________________________, __________________________
   Name
   Dept. sponsoring Graduate Faculty Appointment
   Role (primary advisor, co-advisor, or member)

4. __________________________, __________________________, __________________________
   Name
   Dept. sponsoring Graduate Faculty Appointment
   Role (primary advisor, co-advisor, or member)

5. __________________________, __________________________, __________________________
   Name
   Dept. sponsoring Graduate Faculty Appointment
   Role (primary advisor, co-advisor, or member)

In addition to the foregoing members of the Dissertation Committee, the following committee representatives, each of whom has agreed to serve, will serve as External Members of the Dissertation Committee:

1. External Member Name__________________________________________________________
   (Mailing address and email address of external member)

2. External Member Name__________________________________________________________
   (Mailing address and email address of external member)

III. APPROVAL BY Director of ISSTBE

The student listed above has been completed program requirements and is approved to defend their dissertation on the requested date.

Signature of ISSTBE PhD Program Director __________________________ Date ____________

INSTRUCTIONS: Student is to send completed form and completed ISSTBE flight plan to ISSTBE PhD Program Director at least 3 weeks prior to date of intended thesis defense. Dissertation Committee Chair and student must retain a copy of this form.