



# Department of Anthropology

## Doctoral Dissertation Committee

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Date: \_\_\_\_\_

Student's name: \_\_\_\_\_ GWID: \_\_\_\_\_

The members of this student's dissertation committee are:

	Name	School, Dept.	Contact Information	Signature
Chair			E-mail Phone	
Co-Chair (optional)			E-mail Phone	
Member			E-mail Phone	
Member			E-mail Phone	
Member			E-mail Phone	
Outside Member			E-mail Phone	

This is a revised committee. (For revised proposals, fill in only the parts that change).

\_\_\_\_\_  
Director of Graduate Studies

\_\_\_\_\_  
Date