GRADUATE SCHOOL OF EDUCATION
UNIVERSITY OF PENNSYLVANIA

REQUEST FOR EXTERNAL MEMBER
TO SERVE ON DISSERTATION COMMITTEE

****A copy of the external scholar's curriculum vitae must accompany this form****

Student's Name: _____ Date: _____

Division: _____ Specialization: _____

Name of External Scholar: _____

Mailing Address: _____

_____

_____

E-mail Address:_____

Affiliation: _____

Nature of Relationship to scholar:_____

_____

Is the external scholar your immediate supervisor at your place of employment?

Yes _____ No _____

Chair's Recommendation:

Request approved _____

Request denied _____

_____

Chair's signature Date

_____

External Member's signature Date

Action of Asst. Dean:

Request approved _____

Request denied _____

Other action: _____

_____

Signature of Assistant Dean Date