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: _____
_____
_____

Affiliation: _____

Nature of Relationship to scholar:_____
_____

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

Yes _____ No _____

Advisor's Recommendation:

Request approved _____

Request denied _____

_____
Advisor's signature Date

_____
External Member's signature Date

Action of Asst. Dean:

Request approved _____

Request denied _____

Other action: _____

_____
Signature of Assistant Dean Date