**External Thesis Committee Membership Application**

Please attach a curriculum vitae for the proposed external committee member. Submit the completed and signed form to the Office of Graduate Studies, Shaw Hall 232 or via email to gradstudies@westliberty.edu. The proposed external committee member will be reviewed by the Graduate Council at the next scheduled meeting.

Proposed External Committee Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thesis Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Graduate Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ College/Dept: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Term: \_\_\_\_\_\_\_\_\_\_\_\_

A curriculum vitae must be attached to this form for consideration.

**CERTIFICATION:**

The undersigned certifies that they have reviewed the credentials of the nominee and requests approval from the Graduate Council.

Nominator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Director Date

Recommended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean Date

**Graduate Council ACTION:**

 \_\_\_\_\_\_\_ Approved \_\_\_\_\_\_\_ Denied

Comment(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Provost Date