OFFICE OF RESEARCH AND GRADUATE EDUCATION ROBERT C. BYRD HEALTH SCIENCES CENTER

GRADUATE STUDENT RESEARCH ADVISORY COMMITTEE APPROVAL FORM (Revised 10/18/2017)

Directions:

- Refer to the table below to determine a) number of committee members needed *and* b) graduate faculty status required of each member to assemble your committee. (PhD students: Your program handbook provides information specific to committee size and the number of faculty from within your program that must serve on your committee.)
- Complete form, obtain signatures from committee members, graduate program director, and Dean (Dentistry, Nursing, Pharmacy, and Public Health only), and submit to the Office of Research and Graduate Education (jandria@hsc.wvu.edu) for final signature.

		Type of Committee			
	Graduate Faculty Status	PhD – 5 member *	PhD – 4 member *	MS	Paper/Practicum
umber of Aembers	Regular	≥ 3	≥ 3	≥ 2	≥1
	Associate	≤ 2	≤ 1	≤1	≤ 2
	Non-WVU Faculty **	≤1	≤ 1	≤ 1	≤ 1
z ~	Total	5	4	3	3

* PhD committees: One member must be from a different graduate program.

 $(\geq - \text{ greater or equal}; \leq - \text{ fewer or equal})$

** For non-WVU faculty committee members: Please indicate institution & position. NIOSH associate graduate faculty are not counted in this group.

Due Date: MS prior to 2nd semester; PHD in the 3rd semester; MSN after 3rd semester

Student Name:		WVUID#:
Graduate Program:		Date:
Degree: 🖸 MHS 🗖 MPH 🗖 M	AS 🗆 MSN 🗖 DSN 🗖	PHD
Committee Approval For: Thesis	Dissertation D Paper D Pract	ticum
Signatures of Graduate Advisory Committee: N	lames of Committee Members (typed): Depa	artment or Program: Graduate Faculty Status:
Chair		
Co-Chair, <i>if needed</i>		
Approved By:		
Signature of Advisor (if not committee chair)	Printed/typed Name	Date
Signature of Graduate Program Director	Printed/typed Name	Date
Signature of Dean of School or Designate (Schools of Dentistry, Nursing, Pharmacy and Public He	Printed/typed Name ealth only)	Date
	Dr. Lisa M. Salati	
Signature of HSC Graduate Education Office	Printed/typed Name	Date
	Office Use Only	
Date received; Initials	Entered in database : Date U	Iploaded to SOLE; Date

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GUIDELINES: Graduate Student Research Advisory Committee Approval Form

Committee Membership:

- MS requires 3 committee members, the majority of whom must have regular graduate faculty membership.
- PhD requires 4 or 5 committee members (**check program handbook**), the majority of whom must have regular graduate faculty membership, the appropriate number of faculty from your program (**check program handbook**), and at least one member from a program outside of the student's program of study.
- Paper and Practicum committees require no less than 3 members, one of whom must be a regular graduate faculty member.
- For all PhD & MS committees, no more than one committee member can be a non-member of the WVU graduate faculty. For non-WVU faculty committee members: Please indicate institution & position. NIOSH associate graduate faculty are not counted in this group.

Form Submission:

- Complete the online, fillable PDF form.
- Obtain all necessary signatures: committee members, graduate program director, and Dean of Dentistry, Nursing, Pharmacy, or Public Health.
- Submit form to the Office of Research and Graduate Education (jandria@hsc.wvu.edu) for final signature and approval.

Please Note:

The advisory committee must be approved before completing any forms requiring the committee's signatures (e.g. Plan of Study).

Due Date:

See program handbook.