

### GRADUATE STUDENT RESEARCH ADVISORY COMMITTEE APPROVAL FORM

**Directions:**

MS requires 3 committee members, the majority of whom must have regular graduate faculty membership.  
 PhD requires 5 committee members, the majority of whom must have regular graduate faculty membership, and at least one member from a department 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.  
 No more than one committee member can be a non-member, and the non-member cannot chair or advise.

**SUBMIT DATE: MS prior to 2nd semester; PHD prior to 4th semester; MSN after 3rd semester**

Student Name: \_\_\_\_\_ WVUID#: \_\_\_\_\_

Graduate Program: \_\_\_\_\_ Date: \_\_\_\_\_

Degree:  MHS     MPH     MS     MSN     DSN     PHD

Committee Approval For:  Thesis     Dissertation     Paper     Practicum

| Signatures of Graduate Student Advisory Committee: | Names of Committee Members (typed) | Graduate Faculty Status |
|--|------------------------------------|-------------------------|
| (Chair)  |                                    |                         |
| _____  | _____                              | _____                   |
| _____  | _____                              | _____                   |
| _____  | _____                              | _____                   |
| _____  | _____                              | _____                   |
| _____  | _____                              | _____                   |

**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      | Printed/typed Name | Date  |
| _____   | _____              | _____ |
| Signature of HSC Graduate Education Office    | Printed/typed Name | Date  |
| _____   | _____              | _____ |

**Note:** Once committee and/or program director signatures (if applicable) have been obtained, please make one copy of this form for the student's personal records and one copy for the program director prior to submitting to the Office of Research and Graduate Education. A final copy will be placed in the student's file in their graduate program's office and in the Office of Research and Graduate Education once all signatures have been obtained.

Rev. 10/2015