Doctoral Dissertation Reading Committee



Stanford University

Please address questions concerning this form and submit the completed form to your home department.

Instructions:

This form is to be submitted by the student to the department graduate studies administrator to initiate the appointment of a doctoral dissertation reading committee.

Deadlines:

This form must be submitted before approval of Terminal Graduate Registration (TGR) status or before scheduling a University oral examination that is a defense of the dissertation. The reading committee may be appointed earlier, according to the department timetable for doctoral programs.

All subsequent changes to the reading committee must be approved by the chair of the major department via the Change of Dissertation Adviser or Reading Committee form. The reading committee must conform to University regulations at the time of degree conferral.

Policy:

See GAP 4.8, for further details on the Doctoral Dissertation Reading Committee (http://gap.stanford.edu/4-8.html).

The doctoral dissertation reading committee consists of the principal dissertation adviser and, typically, two other readers. The doctoral dissertation reading committee must have three members and may not have more than five members. All members of the reading committee approve the dissertation. At least one member must be from the student's major department. Normally, all committee members are members of the Stanford University Academic Council or are emeritus Academic Council members.

The reading committee, as proposed by the student and agreed to by the prospective members, is endorsed by the chair of the major department on this Doctoral Dissertation Reading Committee form. The student's department chair may, in some cases, approve the appointment of a reader who is not a current or emeritus member of the Academic Council (via the Petition for Non-Academic Council Doctoral Committee Members form), if that person is particularly well qualified to consult on the dissertation topic and holds a Ph.D. (equivalent foreign equivalent degree). All examiners must hold a Ph.D. degree (or foreign equivalent). Former Stanford Academic Council members and non-Academic Council members may thus on occasion serve on a reading committee.

Any member of the Academic Council may serve as the principal dissertation adviser. If former Academic Council members, emeritus Academic Council members, or non-Academic Council members are to serve as the principal dissertation adviser, the appointment of a co-adviser who is currently on the Academic Council is required. This is to ensure representation for the student in the department by someone playing a major adviser role in completion of the dissertation. However, a co-adviser is not required during the first two years following retirement for emeritus Academic Council members who are recalled to active service. If the reading committee has four or five members, at least three members (comprising the majority) must be current or emeritus members of the Academic Council.

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Student Information:					
Last or Family Name		First		Middle	
Stanford Student Number (8 digits, firs	st digit is 0)	Department Name		Email Address	
Title of Dissertation					
Expected Date for Oral Examination		Expected Date for Submission of Dissertation			
Dissertation Reading Comm	nittee Information:				
Each member of the dissertation rethe dissertation, which is then subm		tify that the work is of acceptable scope egree Progress Office.	e and quali	ty by signing the final copi	ies of
Principal Dissertation Adviser:					
	Printed name	Department			
	Title		Academ	ic Council Member? Yes	□ No
Co-Adviser (if required):	Signature	Email address (red	quired)	Date	
Co-7xuvisci (ii requireu).	Printed name		Departn	ment	
	Title		Academ	ic Council Member? Yes	☐ No
Reader:	Signature	Email address (red	quired)	Date	
	Printed name		Departn	nent	
	Title		Academ	ic Council Member? Yes	☐ No
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Reader:	Signature	Email address (red	quired)	Date	
	Printed name		Departn		
	Title		Academ	ic Council Member? Yes	□ No
	Signature	Email address (rec	quired)	Date	
Reader (Optional):					
	Printed name		Departn Academ	nent ic Council Member? Yes	□ No
	Title		/ icadem	ne council ivicinder.	- 110
	Signature	Email address (red	quired)	Date	
To Be Completed by Depart	tment				
Signature of Department Chair				Date	
Name of Departmental Administrator				Date of Axess input	11/2011