



# ROCKEFELLER COLLEGE OF PUBLIC AFFAIRS & POLICY

UNIVERSITY AT ALBANY  
State University of New York

## Department of Political Science

### Request for Appointment of Ph.D. Dissertation Committee

Student's Name: \_\_\_\_\_

Field or Fields: \_\_\_\_\_

1) Name of Committee Chair: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Committee Chair)

\_\_\_\_\_  
Date

2) Name of Committee Member: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Committee Member)

\_\_\_\_\_  
Date

3) Name of Committee Member: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Committee Member)

\_\_\_\_\_  
Date

4) Name of Committee Member (optional): \_\_\_\_\_

\_\_\_\_\_  
(Signature of Committee Member)

\_\_\_\_\_  
Date

Department Chair: \_\_\_\_\_

Signature

\_\_\_\_\_  
Date