

FOR REVISION ONLY

ADVISORY PHASE FORM

KENT STATE UNIVERSITY
COLLEGE OF EHHS
OFFICE OF GRADUATE STUDENT SERVICES
ROOM 418 WHITE HALL
KENT, OH 44242-0001

ADVISORY PHASE COMMITTEE APPROVAL REQUEST
(SINGLE MAJOR)

Major Program Area _____

Major _____

Optional Minor _____

Optional Cognate or Concentration _____

Residency Plan (additional sheet may be attached)

**AS PREVIOUSLY INDICATED ON
ORIGINAL PLAN OF STUDY**

PhD Student Name

Print _____

/s/ _____
PhD Student Date

**NOTE: ALL SIGNATURES NEEDED ON THIS PAGE MUST BE
OBTAINED BY THE STUDENT.**

APPROVAL OF PLAN OF STUDY AND RESIDENCY PLAN

Print _____

/s/ _____
Major Advisor/Co-advisor (circle one) Date

Print _____

/s/ _____
Co-Advisor/Member if applicable (circle one) Date

Print _____

/s/ _____
Optional Member if applicable Date

Print _____

/s/ _____
Minor Advisor if applicable Date

APPROVALS

/s/ _____
Program Area Coordinator Date

/s/ _____
Associate Dean for Academic Affairs Date

KENT STATE UNIVERSITY
COLLEGE AND GRADUATE SCHOOL OF EDUCATION, HEALTH, AND HUMAN SERVICES
OFFICE OF GRADUATE STUDENT SERVICES
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KENT, OH 44242-0001

ADVISORY PHASE
PH.D COMMITTEE STRUCTURE

SINGLE MAJOR

Single Major and/or Single Minor or Cognate: Minimum of two members.

- Major adviser (or co-adviser) assigned by the program area
- Second member (or co-adviser) may be from the major program area

Note 1: Up-to-date lists of full and associate members of the College and Graduate School of Education, Health, and Human Services are maintained in the Office of Administrative Affairs and Graduate Education, 409 White Hall.

Note 2: Any change in committee structure requires the filing of a revised form.

- If the major adviser has associate graduate faculty rank, the co-adviser or second major adviser must hold full graduate faculty rank.