

DISSERTATION APPROVAL FORM
DOCTOR OF EDUCATION
UNIVERSITY OF NORTHERN IOWA

1. Student Name _____ 2. Major Code _____

3. Student Number _____ 4. Anticipated Graduation Date _____

5. Dissertation Title _____

6. Dissertation Committee Approval Signatures (type each committee member's name below their signature line)

_____ Date _____
Chair:

_____ Date _____
Co-Chair, if applicable:

_____ Date _____
Committee member:

_____ Date _____
Committee member:

_____ Date _____
Committee member:

_____ Date _____
Committee member:

7. Department Head
Intensive Study Area _____ Date _____

8. Approval by the College of Education Dean's Office
Dean, College of Education _____ Date _____

9. All dissertation materials submitted and approved by the Graduate College
Graduate Dean _____ Date _____

Upon final approval, the Graduate College will send this completed form to the Registrar's Office, with photocopies to the student, the student's departmental office, and the College of Education Dean's Office.