

COMMITTEE RECOMMENDATION FORM

<http://grad.uic.edu>

Information should be typed online (except for signatures at bottom), and then printed

Name of Student \_\_\_\_\_ UIN \_\_\_\_\_  
*For defense, type name exactly as it will appear on thesis/dissertation title page* *Nine-digit ID from I-Card*

Student's Graduate Program \_\_\_\_\_ Program Code 20FS \_\_\_\_\_

Master's Thesis Defense\* ☐ Preliminary Examination ☐ EDD Doctorate Project Defense\* ☐ Doctoral Dissertation Defense\* ☐

Anticipated date of exam or defense (mm/dd/yyyy) \_\_\_\_\_ Email of Student \_\_\_\_\_

\* Thesis, doctoral project or dissertation title (must not exceed 105 characters in length including spaces):

REGULATORY ISSUES (Complete the questions in this box only for Master's or Doctoral Defense. Do not complete for Preliminary Examination.)

Does the student's research involve human subjects?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, has the Institutional Review Board approved the proposal?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Approval # _____
Does the student's research involve animals in any way?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, has the Animal Care Committee approved the proposal?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Approval # _____
Does the student's research involve recombinant DNA?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, has the Institutional Biosafety Committee approved the proposal?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Approval # _____

Graduate College policy requires the minimum membership of committees as follows:

	Total Number	Full Membership	Tenure Requirement	Outside Member**
Master's thesis defense	Three	One	One	Not required
Preliminary exam	Five***	Three	Two	Recommended, but optional
Professional doctorate project defense (EDD only)	Three***	One	Not required	Not required
Dissertation defense	Five***	Two	Two	One mandatory

\*\*Outside member is defined as outside of the program, although some programs may require outside of UIC

\*\*\*Chairperson must have full membership (not necessarily tenured)

We recommend that the following be approved as members of the committee for the student named above:

Name of Committee Member

Department of Committee Member

Chairperson (type name on line above)

Name of outside member\*\*  
**curriculum vitae must be attached, if outside of UIC**

Name of program (UIC, but outside of program), **or**,  
Name of institution, agency, etc. (outside of UIC)

Advisor signature

Print name

Date

Program head or director of graduate studies signature

Print name

Date

Approved ☐ Not Approved ☐

Graduate College signature

Date