

Graduate Faculty Representative Request Form
College of Public Health



Concentration:

Student Name:

Student Email:

Chair Name(s):

Chair Email(s):

Dissertation Title:

Tentative Week(s) of Final Defense:

Outside Discipline Member:

The associate dean will appoint a full graduate faculty member who is not in the same graduate program, but has some familiarity with the research area and has prior dissertation advising experience, based on availability.

You may provide up to 3 suggestions. Please Provide Name, Department, Email.

Click here to download roster: [Graduate Faculty Roster](#)

Please email COMPLETED FORM to mellenbu@kent.edu