

Ph.D. Dissertation Supervisory Committee Membership  
 Invitation Request Form  
 Department of Industrial Engineering  
 FAMU-FSU College of Engineering

**Student Information:** (please print or type)

LAST NAME	FIRST NAME	MIDDLE INITIAL	STUDENT NUMBER	TELEPHONE	E-MAIL
TENTATIVE DISSERTATION TITLE				MAJOR PROFESSOR	

**Comments of the Major Advisor on Dissertation Work:**

**Faculty Being Invited to Dissertation Supervisory Committee:**

NAME	(CHECK ONE:)	ACCEPT <input type="checkbox"/>	DECLINE <input type="checkbox"/>
SIGNATURE	DATE		

**Department Chair Signature:**

SIGNATURE	DATE
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