

## **Graduate Committee Service Approval Form**

Attach a NIH- or NSF-style bio sketch or short CV (showing degree credentials and active scholarship status, such as research grants/scholarly support and publications/presentations or other evidence of active scholarship. Do **NOT** send full CVs).

Virginia Tech employees  The listing below is for individuals who are non-tenure-track faculty employees and are recommended for Program Faculty privileges on graduate committees based on their credentials and research activity. They would be counted as if they were tenure-track faculty in the department for the purpose of graduate committee membership (at least 2/3 of the committee members must be Graduate Program Faculty).  Name: """"" University department: "  Appointment type:											
_				<b>D</b>	1.		_	Research Faculty			
Ц	Clinica	al Faculty	Ш	Extension Facu	•			(Professor, Assoc. Professor, or Assist. Professor only)			
	Colleg	Collegiate Faculty   Professor of Practical P		actice	ice 🗆		Other: "				
Re	quested	role:									
		Chair*		Doctoral	(	One Ti	ime	e Service Only?			
		Co-Chair		Masters	[	□ Ye	es	s Student VT ID: "			
*Chair - Please provide additional information regarding duration of appointment, familiarity with Graduate School and program policies, and experience in mentoring graduate students in a separate, attached statement.  Non-Virginia Tech employees  The listing below is for individuals who are VT retirees or non-Virginia Tech employees and are recommended for Program Faculty privileges on graduate committees based on their credentials and research activity. They may not chair advisory committees. They would be counted as outside committee members and may not make up more than 1/3 of the committee.											
Name:			Email:								
Previous VT ID:_ " \( \subseteq \text{VT Retired/Emeritus} \) Employer and Relationship to VT Department: "											
Requ	ested ro	ole:									
		Co-Chair		Doctoral	(	One Ti	me	e Service Only?			
		Member		Masters		☐ Y€	es	Student VT ID:			
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Dept. Head or GPD Signature			Printed Name				Department Date				
Graduate Dean Signature				Date							

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