



Appendix C – Dissertation in Practice Committee Doctor of Education Degree

STUDENT INFORMATION

Name of Candidate: _____ Cohort Year: _____

Dissertation Co-Chairs: _____ & _____

Research Team Members: _____, _____,
 _____, _____

DISSERTATION IN PRACTICE COMMITTEE MEMBERS

Name (Co-Chair)	Signature	Date
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Name (Co-Chair)	Signature	Date
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Name (University)	Signature	Date
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Name (Ex-officio Client)	Signature	Date
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DESCRIPTION OF DISSERTATION IN PRACTICE:

AUTHORIZED SIGNATURES

Program Director	Signature	Date
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Department Chair	Signature	Date
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Dean, College of Education	Signature	Date
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Dean, The Graduate School	Signature	Date
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