



**AddRan College Dean's Office**  
 TCU Box 297200  
 Fort Worth, TX 76129  
 817.257.6163

**Committee Form  
 Doctoral Programs**

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Full Name: \_\_\_\_\_

TCU ID # \_\_\_\_\_

Phone #: \_\_\_\_\_

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**Please indicate the degree sought:**

**History PhD**

**English PhD**

**Rhet. Comp. PhD**

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**All defenses must have a committee. Please indicate your committee members below  
 and secure each member's signature or permission (via email and attach to this form).**

\_\_\_\_\_  
 Committee Chairperson (Print)

\_\_\_\_\_  
 Committee Chairperson (Signature)

\_\_\_\_\_  
 Committee Member (Print)

\_\_\_\_\_  
 Committee Member (Signature)