

Department of Biometry and Epidemiology
Medical University of South Carolina

RECOMMENDATION FOR APPOINTMENT OF
PROGRAM OF STUDY ADVISORY COMMITTEE

- PLEASE TYPE OR PRINT LEGIBLY -

The student along with his/her Program of Study Advisor recommended the appointment of the following Program of Study advisory committee.

Student Name

_____ Advisor, POS	_____ Signature	_____ Dept.	_____ Area of Emphasis	_____ Date
_____ Name	_____ Signature	_____ Dept.	_____ Area of Emphasis	_____ Date
_____ Name	_____ Signature	_____ Dept.	_____ Area of Emphasis	_____ Date
_____ Name	_____ Signature	_____ Dept.	_____ Area of Emphasis	_____ Date
_____ Name	_____ Signature	_____ Dept.	_____ Area of Emphasis	_____ Date
_____ Name	_____ Signature	_____ Dept.	_____ Area of Emphasis	_____ Date

Research Topic: _____

Signature: _____
Graduate Training Director Date

Signature: _____
Department Chair Date

The Program of Study Advisory Committee shall consist of **at least five members**, three from the student's major program and two from outside the program. The Program of Study Advisory Committee shall be chosen by the student in consultation with the Program of Study Advisor. Members should be chosen who have good knowledge of topics included in the departments advanced courses.