



SELECTION OF DISSERTATION LABORATORY FORM

This form is to be used to select a laboratory for research and to obtain agreement from all parties involved. Students may select their dissertation advisor after completion of the Spring Term of their first year, and no later than the end of the Summer Term of the first year.

I hereby request that _____ be appointed as my Dissertation Advisor.

Student's signature Date Student's name (please print)

Lab Location (bldg and room #): _____ Lab Phone Number _____

I agree to advise and support the student in pursuit of his/her academic goals, and to adhere to the policies and deadlines stated in the CNUP Graduate Training Program Guidelines. In addition, I agree to financially support the student beginning September 1, 2025

Dissertation Advisor's signature Date

I agree to provide financial support for the above-named student should funds not be available from his or her dissertation advisor.

Department Chair's printed name Date Department Chair's signature

PLEASE COMPLETE THE ABOVE AND RETURN TO:
Patti (argenzio@pitt.edu) or Jeanne Weiss (jwa56@pitt.edu)

Your dissertation advisor and advisory committee have been approved.

Graduate Program Co-Director: _____