FLORIDA INTERNATIONAL UNIVERSITY
PSYCHOLOGY GRADUATE STUDIES
Appointment of Initial Faculty Advisor and
Initial Advisory Committee
(PGS Form FA-IAC)

ALL INFORMATION MUST BE TYPED

NAME ___________________________________________ STUDENT # ________________

Last                     First                   Middle

ADDRESS ______________________________________________________________________________________

Street                              City                 State                Zip Code      HOME TEL.               BUSINESS

TEL,_____________ E-MAIL________________________________

DATE FIRST ENROLLED AS DEGREE SEEKING__________________________________________________________

ADVISOR AND COMMITTEE: A doctoral student’s Initial Faculty Advisor (FA) must be a member of the Graduate
Faculty who holds Dissertation Advisor Status. The student’s Initial Advisory Committee (IAC) must be compromised of
at least two other members of the developmental program. All other committee members must be members of the
Graduate Faculty, and one of whom may be from outside the department or school, but within FIU. Additional members
may be appointed. If they are not FIU Graduate Faculty, a CV must accompany this form. (TYPE NAME BELOW AND
HAVE FACULTY SIGN)

Faculty Advisor _____________________________________________________________________________________

(Sign)                          (Print)                                             (Sign)                          (Print)

Highest Degree               Department       Date                                    Highest Degree               Department       Date

Member________________________________________________________ (Sign)                          (Print)

Highest Degree               Department       Date                                    Highest Degree               Department       Date

Member________________________________________________________ (Sign)                          (Print)

Member________________________________________________________ (Sign)                          (Print)

COMMITTEE REQUESTED BY: ___________________________ __________

Student Signature                                        Date

COMMITTEE APPROVED BY: ___________________________ __________

Chair/Graduate Program Director               Date

DEADLINE: Sept. 15, Year 1

The copy of this form submitted to the Psychology Graduate Studies must have all original signatures.

PGS Form FA-IAC Revised 05/08/05