



## Pre-Admission Faculty Support Form (ISLD)

**Prospective Students:** Applicants should begin using this form only after the ISLD Director/Designee affirms their readiness to do so. Committee composition must conform to the guidelines outlined in the current ISLD Handbook. If there are more than four committee members, two forms may be used, with the second labeled "Addendum ISLD Faculty Support." Applications for the ISLD program will not be reviewed until this completed form is approved and signed by the ISLD Director or Designee.

Applicant Name:
Email:
Prospective Home Department 1 (Mandatory):
Prospective Home Department 2 (Mandatory)
Other Declared Department(s) (optional):

**Prospective Faculty Committee Members:** By signing this form, you agree to the following

1. If candidate is admitted, you will serve on their ISLD committee in the role specified below.
2. You have reviewed the responsibilities of this position, as stated in the ISLD Handbook.
3. You either have Graduate Faculty Status at WMU or you are in the process of applying for this status. This is required for WMU faculty and non-WMU faculty.
4. You have reviewed the criteria for Graduate Faculty Status and confirm that you qualify.
5. WMU faculty only: You have documentation on file that your chair/director has approved you to serve on this committee.

Faculty Name			
Faculty Institution:	WMU	Other/List:	
Faculty Department/Program:			
Faculty Role:	Chair	Co-chair	Member
Faculty signature/date		email	

Faculty Name:

Faculty Institution:      WMU      Other/List

Faculty Department/Program:

Faculty Role:      Chair      Co-chair      Member

Faculty signature/Date

email

Faculty Name:

Faculty Institution:      WMU      Other/List

Faculty Department/Program:

Faculty Role:      Chair      Co-chair      Member

Faculty signature/Date

email

Faculty Name:

Faculty Institution:      WMU      Other

Faculty Department/Program:

Faculty Role:      Chair      Co-chair      Member

Faculty signature/Date

email

Administrative Approval

ISLD Director/Designee Signature and Date