

COLLEGE OF CRIMINAL JUSTICE  
SAM HOUSTON STATE UNIVERSITY  
DOCTORAL PORTFOLIO COMMITTEE ESTABLISHMENT FORM

NAME: \_\_\_\_\_ SAM ID # \_\_\_\_\_

LOCAL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

LOCAL PHONE NO: \_\_\_\_\_

WORK PHONE NO: \_\_\_\_\_

CELL PHONE NO: \_\_\_\_\_

EMAIL ADDRESS: