



Change to Student's Committee

Refer to program handbook and Graduate School handbook for minimum requirements.

Student Name: _____ Student ID #: _____

Degree: _____ Program: _____ Effective Date: _____

Original Committee

Committee Chairperson Name Department

Committee Member Name Department

Committee Member Name Department

Committee Member Name Department/Affiliation

Committee Member Name Department/Affiliation

Change to Committee

I understand and take responsibility for carrying out the obligations of serving on the above student's committee. All committee members agree to advise the student in execution and adherence to timelines of the thesis/dissertation, review the written thesis/dissertation, make comments/corrections in a timely manner, plan and conduct the defense.

Committee Member Name Approval (Email or Signature) Department/Affiliation

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To be completed by the Committee Chair upon review and approval.

Signature Date

To be completed by the Program Director upon review and approval.

Signature Date

