

APPOINTMENT OF OR CHANGES IN GRADUATE COMMITTEE

This form is intended to ensure that all persons involved in committee changes are fully and properly advised about such changes and have agreed to them. Signatures must be obtained before changes become effective.

STUDENT'S NAME (PLEASE PRINT): _____

STUDENT'S SIGNATURE: _____

YEAR ENTERED CURRENT PROGRAM (PhD or MA): _____

Purpose of proposed new committee:

- _____ Forming Doctoral/Non-Doctoral Committee
- _____ POS Document
- _____ Comprehensive Exam-Written & Oral
- _____ Prospectus Defense
- _____ Final Exam
- _____ MA Final Exam

NOTE: The present committee chair or co-chairs AND the proposed committee chair or co-chairs **MUST** sign even if there is no change. Also, those coming off the present committee will sign and those coming on the proposed committee will sign.

PRESENT COMMITTEE (please print)	ACADEMIC RANK	SIGNATURE
Chair:		
Co-Chair:		
Co-Chair:		

PROPOSED COMMITTEE (please print)	ACADEMIC RANK	SIGNATURE
Chair:		
Co-Chair:		
Co-Chair:		

DEPARTMENTAL APPROVAL: _____ **DATE:** _____

(DEO Signature)