

CHANGE IN THESIS COMMITTEE MEMBERSHIP

STUDENT _____

STUDENT ID NO _____

EMAIL: _____

CONTACT NO _____

PROPOSED CHANGE TO MEMBERSHIP:

MEMBER	Name	Signature	Add/Remove
MEMBER	Name	Signature	Add/Remove
MEMBER	Name	Signature	Add/Remove
MEMBER	Name	Signature	Add/Remove
MEMBER	Name	Signature	Add/Remove
MEMBER	Name	Signature	Add/Remove

JUSTIFICATION FOR CHANGES:

Student

My Signature indicates that I have discussed these changes with faculty and I agree the changes are in my best interests and will further the completion of the project.

Thesis Chair

My Signature indicates that the student and I have discussed these changes and I agree the changes are in the best interests of the student and will further completion of the project.

Graduate Program Chair

My signature indicates that any new committee members are acceptable to the program faculty.

Academic Dean

My signature indicates that the proposed changes are appropriate for the project, the student, and the faculty members involved.

**** Original MUST be submitted to the Graduate Admissions Office****