



Request to Change Thesis or Dissertation Advisory Committee Member

Date: _____

College: _____

Student Name: _____

Department: _____

Student ID Number: _____

Previous Committee
Advisor or Member: _____ ID Number: _____ Date: _____
(Please type name)

Signature:

Previous Committee
Advisor or Member: _____ ID Number: _____ Date: _____
(Please type name)

Signature:

Proposed Committee
Advisor or Member: _____ ID Number: _____ Date: _____
(Please type name)

Signature:

Proposed Committee
Advisor or Member: _____ ID Number: _____ Date: _____
(Please type name)

Signature:

Graduate Program
Director Signature:

Chair Signature:

College Dean Signature:

Form must be submitted to the Office of Admissions, Records and Registration after electronic signatures are completed. Please ensure any relevant additional documentation is attached to the generated email.