



Change in Advisor or Committee Member Approval Form

Please complete and return form to the Program Coordinator. All changes must be approved by the department chair.

Student Name _____ Student ID# U _____

Class _____

Date: _____

I have been requested by the candidate and hereby agree to serve on the dissertation committee and will be present at the defense.

Committee Advisor _____ Date _____

Department Chair _____ Date _____

Office Use Only

Date Processed _____ By _____