

Graduate Advisor and Faculty Committee Form

Name:		Date:	
Graduate Program:			
Status in Program: (Cl	neck one) Taking courses	Satisfactorily completed	proposal
	Satisfactorily c	ompleted comprehensive exams	
	le name and signatures for advi Record any committee changes	or, committee members and extein the right hand column.	rnal
Role	Present Committee	Proposed Committee	
Advisor/Chairperson			
Committee member			
Committee member			
Committee member			
T. 10			
External Committee member (Ph.D. only)			
		Effective date for changes	S:
Graduate student signature		Date	
Graduate coordinator		 Date	

Copies: Student, Department file, Committee Chairperson, Graduate Coordinator, Committee Members, Department Chairperson, and Office of Graduate and Professional Education