

Graduate Advisor and Faculty Committee Form

Name:		Date:	
Graduate Program:			
Status in Program: (Cl	neck one) Taking courses	Satisfactorily complete	ed proposal
	Satisfactorily co	mpleted comprehensive exam	S
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	le name and signatures for advis Record any committee changes		xternal
Role	Present Committee	Proposed Committee	
Advisor/Chairperson			
Committee member			
Committee member			
Committee member			
External Committee member (Ph.D. only)			
	<u> </u>	Effective date for chang	ges:
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