Request for Change in Doctoral Committee (This form must be typed or word processed. Please submit by email to GradStudentSvcs@austin.utexas.edu)

Student Name:		nature:	U	Γ EID:
Graduate Program:	Grad	Graduate Adviser:		
1) Current Committee:				
Name	EID		Department	
Supervisor Co-supervisor				
Co-supervisor Member				
Iember				
fember				
lember				
Member				
2) Proposed Committee (attach C	Vs for new non-G	SC member	s):	
Name	EID		Department	GSC Member?
upervisor Co-supervisor				Yes No
				Yes No
o-supervisor Member				Yes No
fember				Yes No
fember ()				Yes No
fember				.,
1ember				Yes No
By signing below (proxies not committee members, current a members do not agree, a petitimembers must be submitted.	xamination will N uate Studies. xamination WILL dies. The Supplem allowed) the Sund proposed, aron from the Gra	OT take place whental Form pervisor(s) a ware of a duate Advi	rithin 30 days of the must be attached to and Graduate Ad and agree to the aliser and statement	submission of this form this form. Iviser certify that all bove changes. If all ts from all dissenting
Signature, Current Supervisor	Date		e, Proposed Supervisor when changing supervisor)	Date
Signature, Current Co-Supervisor	Date		Signature, Proposed Co-Supervisor Date (Required when changing co-supervisor)	
 Signature Graduate Adviser	Date	Office of	Graduate Studies MAI	

Signature, Graduate Adviser Dai (Be sure you have marked a box under Section 3, above)

Supplemental: Request for Change in Doctoral Committee Within 30 Days of Final Oral Examination (This form must be typed or word processed)

Student Name:	UT EID:				
Graduate Program:	Graduate Adviser:				
Attach this form to the completed "R ONLY IF the student's defense will t Signatures of all removed and added allowed.	ake place within	30 days of the request.			
Names and Signatures of Committee Memb	ers To Be REMOVE	ED:			
Name	EID	Signature			
Member	-				
Member	-				
Member					
Names and Signatures of Committee Memb	ers To Be ADDED:				
Name	EID	Signature			
Member					
Member	-	_			
Member					
If committee members being removed within a Advisor must provide an explanation and sig		cannot sign this form, the Graduate			
Signature, Graduate Adviser Date	Office of C	Graduate Studies, MAI 101 Date			