

Request for Change in Doctoral Committee

(This form must be typed or word processed)

Student Name: _____ Signature: _____ UT EID: _____

Graduate Program: _____ Graduate Adviser: _____

1) Current Committee:

Name	EID	Department
Supervisor _____ Co-supervisor _____	_____	_____
Co-supervisor _____ Member _____	_____	_____
Member _____	_____	_____
Member _____	_____	_____
Member _____	_____	_____
Member _____	_____	_____
Member _____	_____	_____

2) Proposed Committee (attach CVs for new non-GSC members):

Name	EID	Department	GSC Member?
Supervisor _____ Co-supervisor _____	_____	_____	Yes __ No __
Co-supervisor _____ Member _____	_____	_____	Yes __ No __
Member _____	_____	_____	Yes __ No __
Member _____	_____	_____	Yes __ No __
Member _____	_____	_____	Yes __ No __
Member _____	_____	_____	Yes __ No __
Member _____	_____	_____	Yes __ No __

3) The Graduate Adviser must check one of the following boxes:

- The student's Final Oral Examination will NOT take place within 30 days of the submission of this form to the Office of Graduate Studies.
- The student's Final Oral Examination WILL take place within 30 days of the submission of this form to the Office of Graduate Studies. The Supplemental Form must be attached to this form.

By signing below (proxies not allowed) the Supervisor(s) and Graduate Adviser certify that all committee members, current and proposed, are aware of and agree to the above changes. If all members do not agree, a petition from the Graduate Adviser and statements from all dissenting members must be submitted. The final committee will be determined by the Graduate Dean.

Signature, Current Supervisor Date

Signature, Proposed Supervisor Date
(Required when changing supervisor)

Signature, Current Co-Supervisor Date

Signature, Proposed Co-Supervisor Date
(Required when changing co-supervisor)

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

Office of Graduate Studies, MAI 101 Date