

Petition to Change Membership of Dissertation Committee

Student: Fill out this form, have your faculty advisor sign it, then return the original to the Graduate Program Coordinator, to be considered by the CHD.

Date: _____

GSAS Year: _____

Name of student: _____

Title of prospectus: _____

Original committee:

(Print or Type Name of Advisor/Chair - required)

(Signature)

(Print or Type Name of Reader - required)

(Signature)

(Print or Type Name of Reader - required)

(Signature)

New committee:

(Print or Type Name of Advisor/Chair - required)

(Signature)

(Print or Type Name of Reader - required)

(Signature)

(Print or Type Name of Reader - required)

(Signature)