

CHANGE OF DISSERTATION CHAIR OR COMMITTEE MEMBER

First Name:	<input type="text"/>	Last Name:	<input type="text"/>	ID#:	<input type="text"/>
Degree:	<input type="text"/>	Major Area:	<input type="text"/>	Email Address	<input type="text"/>
Title of Dissertation:	<input type="text"/>			Date:	<input type="text"/>

Dissertation Chair or Committee Composition: enter all members; signatures required for added and deleted members.

<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> No Change	Current/New Chair	<input type="text"/>	Department	<input type="text"/>
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<input type="text"/>	Email Address	<input type="text"/>
Signature required for addition or deletion		

<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> No Change	Former Chair	<input type="text"/>	Department	<input type="text"/>
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<input type="text"/>	Email Address	<input type="text"/>
Signature required for addition or deletion		

<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> No Change	Methodologist	<input type="text"/>	Department	<input type="text"/>
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<input type="text"/>	Email Address	<input type="text"/>
Signature required for addition or deletion		

<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> No Change	Member	<input type="text"/>	Department	<input type="text"/>
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<input type="text"/>	Email Address	<input type="text"/>
Signature required for addition or deletion		

<input type="checkbox"/> Add	<input type="checkbox"/> Delete	<input type="checkbox"/> No Change	Member	<input type="text"/>	Department	<input type="text"/>
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<input type="text"/>	Email Address	<input type="text"/>
Signature required for addition or deletion		

Signatures and Approvals

Signature of Student	Date
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Signature of Department Chair	Date
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Signature of Dean, College of Education & International Services	Date
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