SCHOOL OF MARINE SCIENCE CHANGE IN M.S. OR PH.D. ADVISORY COMMITTEE



DEGREE PROGRAM

Student Information:					
STUDENT LAST NAME	STUDENT FIRST NAME	M.I.	BANNER ID (93#)		

STUDENT SIGNATURE		DATE				
I request approval for change(s) in	my advisory committee	e, as indicate	d belov	w.		
Change of Advisor(s) Change of Committee Member(s)						
Reasons for Requested Change – Select All That Apply:						
Adding a co-advisor Retirement of faculty membe	amnia	ypass (M.S.) nding	OĪ	Change in res	search focus	
Change of Advisor(s) – Please Remov	e: +	,		ou Ci		
FORMER ADVISOR NAME	FORMER ADVISOR SIGNATURE	עו	O	DATE	gn	
FORMER CO-ADVISOR NAME	FORMER CO-ADVISOR SIGNATUR	Re		ustra	r	
Change of Advisor(s) – Please Add:						
New Advisor Name	New Advisor Signature	eta	ils	DATE		
New Co-Advisor Name	New Co-Advisor Signature			DATE		
Change of Committee Member(s) – Please Remove:						
FORMER COMMITTEE MEMBER NAME	SIGNATURE			DATE		
FORMER COMMITTEE MEMBER NAME	SIGNATURE		С	DATE		
Change of Committee Member(s) – Please Add:						
NEW COMMITTEE MEMBER NAME	SIGNATURE			DATE		
NEW COMMITTEE MEMBER NAME	SIGNATURE		C	DATE		

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External Committee Member – Please Add:				
NAME	EMAIL ADDRESS			
Position or Title				
NAME OF INSTITUTION OR ORGANIZATION				
MAILING ADDRESS				
Campl	o Form			
SIGNATURE SIGNATURE	DATE			
The external committee member is also required to upload a current curriculum vitae or resume.				
Action of Associate Dean for Academic Affairs:				
NAME SEE SIVIS	Registrar			
SIGNATURE	DATE			
tor I)	etails			
IF DENIED, REASON:	Otano			

Once all signatures have been obtained, this form will route automatically to the SMS Registrar and all signers will receive a final copy.