



THE UNIVERSITY OF TEXAS AT DALLAS

Geosciences

ROC21 800 W Campbell Road Richardson Texas 75080-3021 972-883-2401 Fax 972-883-2537

COMMITTEE APPOINTMENT GRADUATE PROGRAM

Doctoral degree [checkbox]

Master's degree [checkbox]

ID# _____

Student _____

Requests the formal appointment of the following members to serve as his/her supervisory committee.

Supervising Professor _____

please print

signature _____

Co-Chair (if applicable) _____

please print

signature _____

Committee Member _____

please print

signature _____

Committee Member _____

please print

signature _____

Committee Member _____

please print

signature _____

Committee Member _____

please print

signature _____

APPROVAL

Department Head _____

signature

date

Dean of Graduate Education _____

signature

date

I understand the membership of this committee cannot be changed for scheduling reasons, but only in the case of serious extenuating circumstances.

Student _____

signature

date