

Change of Supervisory Committee

For the Doctoral Degree | Office of Graduate Studies | University of Nebraska-Lincoln



INSTRUCTIONS

This form is the way for committee chairs to notify the Office of Graduate Studies of any committee member changes. *Submit completed form with original signatures, not a photocopy.*

STUDENT AND PROGRAM

Student Name _____

Student NU ID Number _____

Mailing Address _____

Major _____

Specialization _____

REVISED SUPERVISORY COMMITTEE

List *all* members of the supervisory committee established by this change. (Typed names, not signatures.)

New Committee: Chair _____

Co-Chair (if applicable) _____

Members _____

Outside Representative _____

APPROVALS

Current/Prior Chair _____
Signature _____ *Date* _____

New Committee Chair (if changing) _____
Signature _____ *Date* _____

Departmental Graduate Committee Chair _____
Signature _____ *Date* _____

Revised 2008/06