



# Graduate Student Change of Committee Form

(Submit to the Graduate School, 210 Jesse Hall by the end of the second semester)

Student name: \_\_\_\_\_

Mizzou ID number: \_\_\_\_\_ Anticipated graduation date: \_\_\_\_\_

Academic program: \_\_\_\_\_ Degree (i.e MBA, PhD, etc.): \_\_\_\_\_

Program address: \_\_\_\_\_ Major: \_\_\_\_\_

\_\_\_\_\_ Emphasis area: \_\_\_\_\_

*(If applicable)*

## Member(s) to be removed:

Name	Department	Address

## Member(s) to be added:

Name	Department	Address

## Reason for Change:

---



---

Student's signature

Date

Faculty Adviser's signature

Date

*As Director of Graduate Studies, I certify that all members of the committee, including members being added and/or removed, have been informed of this change to the committee:*

Director of Graduate Studies signature

Date

Dean of the Graduate School signature

Date