

**Graduate School**

**Instructions: Complete this form to alter the composition of your Dissertation Committee. If any proposed member is not a member of Temple University's Graduate Faculty, that individual's curriculum vitae (CV) must be attached.**

**SECTION 1: STUDENT INFORMATION**

Name (Last, First and Middle)		TUId
Current Mailing Address (including City, State and Zip Code)		
Telephone (beginning with Area Code)	Temple Email	
School or College	Program	Degree

**SECTION 2: CONSENT OF COMMITTEE MEMBER(S) DEPARTING AND JOINING**

Depart	Join	Signature of Member	Name of Member	Department

**SECTION 3: REASON FOR CHANGE IN COMMITTEE MEMBERSHIP****SECTION 4: DISSERTATION PROPOSAL APPROVAL LEVEL REQUIRED BY DEPARTMENT AND PROGRAM**

- Dissertation Advisory Committee only       School or College Review  
 Department Review       Other: \_\_\_\_\_

**SECTION 5: APPROVAL SIGNATURES**

Signature of Student (required)		Date
Signature of Dissertation Advisory Chair (required)	Name of Dissertation Advisory Chair	Date
Signature of Department Representative (if checked in section 4)	Name of Department Representative	Date
Signature of School or College Representative (if checked in section 4)	Name of School or College Representative	Date

**SECTION 6: GRADUATE SCHOOL APPROVAL**

<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Signature of Vice Provost or Designee	Name of Vice Provost or Designee	Date
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