FORM 13
REQUEST FOR CHANGES IN COMMITTEE
Be sure to enter your change in GradPlan

(print Student’s name) __________________________ (signature) __________________________ (date)

I. Guidance Committee or Chair:

Student list all original members. Signatures are needed only from the new member & chair & IM Director.

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Chair) (print new chair name) (signature) (date)

II. Dissertation Committee or Director:

Student list all original members. Signatures are needed only from the new member & chair & IM Director.

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Member) (print new member’s name) (signature) (date)

_________________________ replace with ____________________________ ____________________________ ____________
(Chair) (print new chair name) (signature) (date)

APPROVED:

__________________________________________ (Director, Information and Media) (date)

Information and Media
304 Communication Arts & Science Bldg.
East Lansing, MI 48824
(517) 432-1526
(517) 355-7710 (fax)

Cc: Student
Student File