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RECOMMENDATION FOR DOCTORAL ADVISORY/DISSERTATION COMMITTEE REVISION

School/Department: _____ Date: _____

Student's Name: _____ Student ID Number: _____

Address: _____ City: _____ State: _____ Zip: _____

Degree: _____ Major: _____

Please justify the following replacements, additions, or deletions that are recommended to The Graduate School for the doctoral advisory/dissertation committee of the above-named student:

The committee, revised as recommended, will now consist of the following graduate faculty members, who have agreed to assume this responsibility:

	<u>Graduate Faculty Status</u>
Chair's Signature: _____ Print Name: _____	MEMBER with Endorsement (Chair must be Graduate Faculty Member with Endorsement to Chair.)
Member's Signature: _____ Print Name: _____	<div style="border: 1px solid black; height: 20px;"></div>
Member's Signature: _____ Print Name: _____	<div style="border: 1px solid black; height: 20px;"></div>
Member's Signature: _____ Print Name: _____	<div style="border: 1px solid black; height: 20px;"></div>
Member's Signature: _____ Print Name: _____	<div style="border: 1px solid black; height: 20px;"></div>

Department Head or Director of Graduate Study: _____ Date _____

Dean, School of Education: _____ Date _____
(required for education majors)

Approved: _____ Date _____
Dean of The Graduate School

- Original to Student File
- c: Department Head or Director of Graduate Study
 - Dean (for education majors)
 - Committee Chair
 - Student