



Request for Supervisory Committee Member Change

The University of Texas Graduate School of Biomedical Sciences at Galveston

Student's Name: _____ **Current Graduate Program:** _____

Date of Request: _____ **Date for Change to Become Effective:** _____

Rationale for Request for Supervisory Committee Change(s):

I. I wish to change my **Supervisory Professor** from:
to

II. I wish to change the **Chairperson** of my supervisory committee from:
to

III. I wish to change my **Supervisory Committee member** from:
to

IV. I wish to change my **Supervisory Committee member** from:
to

V. The members of my supervisory committee **will now be:**

Signature: Current or New Chairperson _____ Date: _____

Signature: Program Director _____ Date: _____

Completed by GSBS:

APPROVED: _____ DISAPPROVED: _____

Signature: _____ Date: _____

Cary W. Cooper, Ph.D. Professor and Dean Graduate School of Biomedical Sciences