

COLLEGE OF WILLIAM AND MARY
School of Marine Science/Virginia Institute of Marine Science

REQUEST FOR A CHANGE IN ADVISORY COMMITTEE AND/OR DEPARTMENT

I, _____, request approval for the following change(s)
Student's Name, PRINTED

in my Advisory Committee for the degree of _____.

DATE: _____ Student's
Signature: _____

I. DEPARTMENT DECLARATION

___ REQUEST FOR A CHANGE IN DEPARTMENT DECLARATION,

From: _____

TO: _____

MY THESIS/DISSERTATION TOPIC (circle one) REMAINS UNCHANGED / HAS CHANGED TO:

___ NO CHANGE IN DEPARTMENT DECLARATION

II. MAJOR PROFESSOR

I request the following change:

PRINTED NAME

FROM: _____

(FOR CO-ADVISOR IF APPLICABLE)

SIGNATURE

DATE

TO: _____

(FOR CO-ADVISOR IF APPLICABLE)

(FOR CO-ADVISOR IF APPLICABLE)

-OVER-

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III. COMMITTEE MEMBER(S)

I request the following changes in the membership of my Advisory Committee:

*DROP:

<u>Printed Name</u>	<u>Signature</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

*ADD:

<u>Printed Name</u>	<u>Signature</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

***NOTE:** Signatures must be obtained for any committee members (including major or co-major professors) that are being **DROPPED** or **ADDED**.

PLEASE provide the address of **NEW** outside committee member below:

<p><u>OUTSIDE MEMBER Information</u> (if applicable) -- PLEASE ATTACH A VITA OF YOUR OUTSIDE COMMITTEE MEMBER</p> <p>FULL NAME: _____</p> <p>TITLE: _____ AFFILIATION: _____</p> <p>MAILING ADDRESS: _____</p>

DEAN OF GRADUATE STUDIES ACTION: *APPROVED* / *DENIED*

DATE: _____ SIGNATURE: _____
DEAN OF GRADUATE STUDIES

IF DENIED, REASON: _____

DATE OF NOTIFICATION TO STUDENT: _____