



THE UNIVERSITY OF UTAH GRADUATE SCHOOL

DEPARTMENT: _____

REQUEST TO CHANGE SUPERVISORY COMMITTEE PERSONNEL

STUDENT: _____ ID# _____

CURRENT PERSONNEL

(CHAIR) _____

PROPOSED PERSONNEL (Need signatures of all members)

(CHAIR) _____

JUSTIFICATION FOR CHANGE: _____

APPROVED BY CHAIR OF SUPERVISORY COMMITTEE:

_____ Date: _____

APPROVED BY DIRECTOR OF GRADUATE STUDIES: _____

_____ Date: _____

Return the original to the
Academic Program Specialist
2012 MCE