

**Dissertation Chair/Committee Member Change Request Form**

Submit the completed form to The Graduate College at [gcdegspcl@txstate.edu](mailto:gcdegspcl@txstate.edu) no less than **sixty (60) days** before the final defense of the dissertation. If submitted less than sixty (60) days before the final defense, a justification for the change must be included in the email. It is the student's responsibility to make sure The Graduate College receives this form in a timely manner. Any committee member(s) requested below must hold current Regular Graduate, Associate Graduate, or Courtesy Graduate faculty status. Committee chairs must hold Regular Graduate status.

Student Name: _____	Texas State ID: _____
Major: _____	Degree (check one): <input type="checkbox"/> Ph.D. <input type="checkbox"/> Ed.D.
Student Signature: _____	Date: _____

Please select the appropriate option and include the information on the lines below. Signature indicates agreement to serve in the selected role for the student listed above. It also indicates that the signee(s) is/are aware that they will not be reimbursed for any expenses incurred as part of this service.

**Add a Committee Chair**

Printed Proposed Chair	Proposed Chair's Department	Signature	Date
_____	_____	_____	_____

**Add a Co-Chair**

Printed Proposed Co-Chair	Proposed Co-Chair's Department	Signature	Date
_____	_____	_____	_____

**Add a Committee Member**

Printed Proposed Member	Proposed Member's Department	Signature	Date
_____	_____	_____	_____

**Remove a Committee Chair/Member**

Printed Chair/Member to be Removed	Check One: <input type="checkbox"/> Chair <input type="checkbox"/> Member	Date
_____		_____

Signatures below indicate the approval of the above recommendation:

Printed Name	Signature	Date
_____	_____	_____
Dissertation Committee Chair/Co-Chair		
_____	_____	_____
Co-Chair (if applicable)		
_____	_____	_____
Doctoral Program Director		
_____	_____	_____
Department Chair		

**For The Graduate College Use Only**

Based on the recommendation above, the Dissertation Chair/Committee Member Change Request is **approved**.

_____	_____
Dean or Dean's Designee of The Graduate College	Date