

Thesis Chair/Committee Member Change Request Form

This form is required to make changes to an existing thesis committee. Submit the completed form to The Graduate College at gcdegspcl@txstate.edu. It is the student's responsibility to make sure The Graduate College receives this form in a timely manner. Failure to submit this form prior to submitting the completed thesis to Vireo could delay graduation. Any committee member(s) requested below must hold current graduate faculty status.

Student Name:		Tex	as State ID:	
Major:		Deg	ree:	
Student Signature:		Date:		
Please select the appropriate option selected role for the student listed a expenses incurred as part of this ser	bove. It also indicates that the			
☐ 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 □ □ □ □ Date				
- I filled Chail/Mehiod to be	Chec	ck One:	☐ Chair ☐ Member	
Signatures below indicate the approval of the above recommendation:				
Printed Name		Signature		Date
Thesis Committee Chair/Co-Chair				
Co-Chair (if applicable)				
Graduate Program Advisor				
Department Chair				
For The Graduate College Use Only				
Based on the recommendation above, the Thesis Chair/Committee Member Change Request is approved .				
Dean or Dean's Designee of The Graduate College Date				