

THESIS COMMITTEE MEMBERSHIPS
School of Biology

Date: _____ **Initial membership form** ___ **Revised membership form**

Student: _____ **Semester Entered Program:** _____

Program (check one): ___ **Ph.D.** ___ **M.S. with thesis** ___ **M.S. without thesis**

Thesis committee members (must have at least 5, with primary advisor within Biology, and at least one member from outside of Biology)

1)	_____	_____	_____
	<i>Advisor's printed name</i>	<i>Signature</i>	<i>School/Department</i>
2)	_____	_____	_____
	<i>External member's printed name</i>	<i>Signature</i>	<i>School/Department</i>
3)	_____	_____	_____
	<i>Co-advisor or Member's printed name</i>	<i>Signature</i>	<i>School/Department</i>
4)	_____	_____	_____
	<i>Member's printed name</i>	<i>Signature</i>	<i>School/Department</i>
5)	_____	_____	_____
	<i>Member's printed name</i>	<i>Signature</i>	<i>School/Department</i>
6)	_____	_____	_____
	<i>Member's printed name</i>	<i>Signature</i>	<i>School/Department</i>
7)	_____	_____	_____
	<i>Member's printed name</i>	<i>Signature</i>	<i>School/Department</i>
	_____	_____	_____
	<i>Graduate Coordinator printed name</i>	<i>Signature</i>	<i>School/Department</i>

Submit the completed and signed initial form to the Graduate Coordinator by the end of the second semester of your program and submit a completed and signed revision form whenever such revisions are made.