



THE COLLEGE OF GRADUATE STUDIES
Montana State University
GRADUATE COMMITTEE REVISION
FORM

Form fields for personal information: Last Name, First Name, Middle Name, Date, SSN or GID, Mailing Address (Street, City, State, ZIP), E-mail, Degree, Department or Program Name.

This form is used to revise a graduate student's committee that has previously been approved on the Graduate Program of Study & Committee Form. Committees may change from time to time as faculty change or as a student's research emphasis shifts. Committees should not be changed simply to accommodate short term scheduling issues.

When filling out this form, state the reason for the requested change(s) on the line number corresponding to the effected committee member's name. Ensure that both the person(s) being removed, and the one(s) being added to the committee initial next to their name indicating their concurrence. Please list committee members in the same order they appear on the Graduate Program of Study & Committee Form.

Table with two columns: Original Committee Member(s) and Revised Committee Member(s). Rows 1-5 include Name, Chair, Date, and E-mail fields. Row 6 is for the College of Graduate Studies Representative.

Reasons for Revised Committee section with 6 numbered lines for text input.

Committee Approval section with fields for Head of Major Department, Date, Dean of College of Graduate Studies, and Date.