

APPOINTMENT OF OR CHANGES IN GRADUATE COMMITTEE-CINEMATIC ARTS

This form is intended to ensure that all persons involved in committee changes are fully and properly advised about such changes and have agreed to them. Signatures must be obtained before changes become effective.

STUDENT'S NAME (PLEASE PRINT): _____

STUDENT'S SIGNATURE: _____

AREA/YEAR ENTERED: _____ **DEGREE OBJECTIVE:** MA MFA PhD

Purpose of proposed new committee:

- | | |
|--|--|
| <input type="checkbox"/> Plan of Study | <input type="checkbox"/> MFA Comprehensive Exam-Written & Oral |
| <input type="checkbox"/> Comprehensive Exam-Written & Oral | <input type="checkbox"/> MFA Clearance |
| <input type="checkbox"/> Prospectus Defense | <input type="checkbox"/> MFA Final Exam (Thesis Defense) |
| <input type="checkbox"/> Final Exam (Dissertation Defense) | |
| <input type="checkbox"/> MA Final Exam (Non-Thesis) | |

NOTE: The present committee chair or co-chairs AND the proposed committee chair or co-chairs **MUST** sign even if there is no change. Also, those coming off the present committee will sign and those coming on the proposed committee will sign.

PRESENT COMMITTEE (please print)	ACADEMIC RANK	SIGNATURE
Chair:		
Co-Chair:		
Co-Chair:		

PROPOSED COMMITTEE (please print)	ACADEMIC RANK	SIGNATURE
Chair:		
Co-Chair:		
Co-Chair:		

DEPARTMENTAL APPROVAL: _____ **DATE:** _____
 (DEO Signature)