

Dissertation Committee Addition/Deletion/Change Form

Western Illinois University
School of Graduate Studies

We recommend the following change(s) in the dissertation committee for:

WIU ID No.:

Student's name (Last, First, Middle/Maiden):

Current Committee

Dissertation Chair:

Committee member:

Committee member:

Committee member:

Recommended change(s)

Delete:

Add:

Delete:

Add:

Delete:

Add:

SIGNATURES

Doctoral Student: _____ Date: _____

Dissertation Chair: _____ Date: _____

Department Chair: _____ Date: _____

Member added: _____ Date: _____

Member added: _____ Date: _____

College Dean/Assoc. Dean: _____ Date: _____

Director of Graduate Studies: _____ Date: _____

The recommendations for membership on this dissertation committee have been approved by the Graduate School.
Any recommended changes in membership of this committee must be forwarded to the Graduate School for approval.



Western Illinois University

School of Graduate Studies

1 University Circle

Macomb, IL USA 61455-1390

Phone (309)298-1806; Fax (309)298-2345

www.wiu.edu/grad; Email: Grad-Office@wiu.edu

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