

THE UNIVERSITY OF UTAH GRADUATE SCHOOL

PROGRAM: _____

REQUEST TO CHANGE SUPERVISORY COMMITTEE PERSONNEL

STUDENT: _____ ID# _____

CURRENT PERSONNEL: (PRINT NAMES)

(CHAIR) _____

PROPOSED PERSONNEL: (PRINT NAMES)

(CHAIR) _____

JUSTIFICATION FOR CHANGE: _____

APPROVED BY CHAIR OF SUPERVISORY COMMITTEE (OF NEW COMMITTEE IF CHAIR IS BEING CHANGED):

_____ Date: _____

APPROVED BY DIRECTOR OF PROGRAM:

_____ Date: _____