Department of Biology
Graduate Studies
Dissertation Committee Appointment

TO: Dissertation Committee **DATE:**

This is to inform you that you have been asked to serve as a member of the Thesis Committee

for _____
Last Name First Name Middle Name

I wish to thank you in advance for agreeing to serve on this Thesis Committee. Please acknowledge your intent of service by signing the appropriate name below.

Dissertation Committee Members (Please print or type)	**Signatures**	**Date**
_____, **Director**	_____	_____
_____,	_____	_____
_____,	_____	_____
_____,	_____	_____
_____,	_____	_____

_____ _____

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Proposal Approval

When the thesis committee has met and the thesis proposal has been approved, each committee member should initial below.

_____ _____ _____ _____ _____
Director

Note to Student: Once your proposal has been approved, please return this form along with a copy of the approved thesis proposal to the Biology Graduate Office.