<u>Department of Biological Sciences</u> <u>Thesis Committee Membership Record</u>

Graduate Student Name)	(D	Pate)	
Proposed Thesis Topic or Title)			_
I agree to serve as a member of the	ne thesis committee for the above ment	ioned graduate s	tudent.
(Committee Member Name)	(Committee Member Signature)	(Date)	Check if Research Supervisor
(Committee Member Name)	(Committee Member Signature)	(Date)	-
(Committee Member Name)	(Committee Member Signature)	(Date)	
	esis committee for the above mentioned ve signed above as committee members		nt, and approve
(Thesis Advisor Name)	(Thesis Advisor Signature)	(Date)	
(Former Thesis Advisor Name)	(Former Thesis Advisor Signature)	(Date)	
The Graduate Studies Committee student.	approves the thesis committee for the	above mentioned	d graduate
(Graduate Coordinator Name)	(Graduate Coordinator Signature)	(Date)	

When completed, this form will be placed in the student's folder in the Department of Biological Sciences. Copies may be sent to the student, other committee members and the former advisor if applicable. If there are changes in committee composition, the student should complete a new form.