



PHD COMMITTEE CHANGE FORM
PhD Committee - External College Representatives

Student Name: _____ **PID #:** _____

Student OHIO Email Address: _____

Degree Program/Code: _____

Department/School: _____

External College Representative #1 Name/Title: _____

Representative's Department/School: _____

External College Representative #2 Name/Title: _____

Representative's Department/School: _____

Tentative Title of Dissertation:

Committee Members - Type Name and Title:

Committee Chair/Advisor: _____

Committee Member #2: _____

Committee Member #3: _____

Committee Member #4 (optional): _____

INDICATE THE CHANGE AND REASON FOR CHANGE:

APPROVED:

Advisor

Date

Department/School Graduate Chair

Date

Associate Dean for Research and Graduate Education

Date

Distribution:
Dean's Office (One Drive electronic student folder)
Graduate Chair/Advisor/Student