UNIVERSITY of HOUSTON

COLLEGE of NATURAL SCIENCES & MATHEMATICS

Committee Composition Approval Form

Committee for: ☐ **MS Thesis** ☐ **PhD Dissertation**

Department: _____ **Degree Program:** _____

Last Name: _____

First Name: _____

UH ID: _____

Email Address: _____

Semester and year of entrance into graduate program: _____

Semester and year of anticipated graduation: _____

It is requested that the following members be appointed to constitute the Doctoral/Master's Committee for the above named student. By initialing below they have agreed to serve.

Committee Chairperson: (*Also sign below to indicate your approval of the committee composition*.)

Printed Name	UH ID	Department	Initials

Additional Committee Members: (*UH ID is only required for UH System employees*.)

Printed Name	UH ID	Department/Institution/Company	Initials

Committee Approval Signatures:

Approved: _____ _____
Committee Chairperson Date

Approved: _____ _____
Department Graduate Chairperson Date

Approved: _____ _____
Department Chairperson Date

Approved: _____ _____
Dean, College of Natural Sciences and Mathematics Date

Rev. 04/10/12