

**Petition for Change in Doctoral Committee**  
*(This form must be typed or word processed)*

**Student Name:** \_\_\_\_\_ **UT EID:** \_\_\_\_\_

**Graduate Program:** \_\_\_\_\_ **Graduate Adviser:** \_\_\_\_\_

**1) Current Committee:**

Name	Department
Supervisor _____	_____
Co-supervisor _____ Member _____	_____
Member _____	_____
Member _____	_____
Member _____	_____
Member _____	_____
Member _____	_____

**2) Proposed Committee:**

Name	Department	GSC Member?
Supervisor _____	_____	Yes No
Co-supervisor _____ Member _____	_____	Yes No
Member _____	_____	Yes No
Member _____	_____	Yes No
Member _____	_____	Yes No
Member _____	_____	Yes No
Member _____	_____	Yes No

**3) This change has been requested for the following reasons:**  
*(Reasons must be provided by Graduate Adviser)*

By signing below the Supervisor(s) and Graduate Adviser certify the following: All committee members, current and proposed, are aware of and agree to these changes. The new members will have ample time to become familiar with the student's dissertation, accept the responsibility, and are aware that there will be no reimbursement for any expenses incurred. A curriculum vitae is attached for any non-GSC member. A curriculum vitae and letter of non-remuneration are attached for any non-UT employee. The final oral will not be held until at least 30 days after the effective date of these changes.

\_\_\_\_\_  
**Signature, Current Supervisor**      **Date**

\_\_\_\_\_  
**Signature, Proposed Supervisor**      **Date**  
*(Required when changing supervisor)*

\_\_\_\_\_  
**Signature, Current Co-Supervisor**      **Date**

\_\_\_\_\_  
**Signature, Proposed Co-Supervisor**      **Date**  
*(Required when changing co-supervisor)*

\_\_\_\_\_  
**Signature, Graduate Adviser**      **Date**

\_\_\_\_\_  
**Graduate Dean**      **Date**