

## **Master's Revised Supervisory Committee Form**

This form is to be submitted to the CEHHS Office of Academic Services and Intern Support to request a change in composition of an already established master's student committee. All members composing the new committee must sign. Although the signature of faculty who are no longer serving is not required, it is common courtesy for the student to inform him/her before revising the committee.

Once approved, the new committee will be updated in the university's Graduate Student Tracking (GST) database. Only signatures of committee members, as per the date the supervisory committee was officially approved, will be accepted on other paperwork. Please note that the university locks all committees of master's thesis students in the first three weeks of the term the student applies for graduation (or before the thesis defense, if earlier). Please refer to departmental, college and university policies for details about committee composition.

| <b>Student Information:</b>                     |                          |  |
|---|--------------------------|--|
| Full Name:                                      |                          | EMPLID:                                    |
| FSU Student E-mail:                             |                          | _  |
| Department:                                     |                          | _  |
| Major:  |                          | _  |
| Digital signatures will only be accepted if com | pleted through FSU DocuS | ign and the verification page is included. |
| (Co-)Major Professor / Major Coordinator        | r Signature              |  |
| (Co-)Major Professor (if applicable)            | Signature                |  |
| Committee Member                                | Signature                |  |
| Committee Member                                | Signature                |  |
| Committee Member                                | Signature                |  |
| Approval:                                       |                          |  |
| Department Chair                                | Signature                | Date                                       |
| Academic Dean or Delegate                       | Signature                |  |