Please complete this form any time you have a change in your Research Advisory Committee.

Upon securing the signature of your major professor, please deliver this form to the METC Program Administrator within 1-week of meeting with your major professor.

The METC Graduate Achievement Committee (GAC) Chair has authority to approve any updates/revisions to your Research Advisory Committee. Please keep in mind that you must have prior approval from the GAC before any changes officially take place. Change will be recognized upon GAC Chair approval. You will received a copy of this approved form back within 30-days of receipt.

STUDENT'S FULL NAME: _____

M.S. Students need 3 committee members ‘including advisor’
Ph.D. Students need 5 committee members ‘including advisor’
   For PhD, TWO members should be from outside the major field of the student
   AND at least ONE outside of METC affiliation.
   At a minimum ONE MUST BE from outside field. (Graduate School Requirement) meaning if your advisor if from Pharmacy, then two of your committee members should be from outside Pharmacy.

The following faculty members have agreed to serve on the Research Committee of above named student.

<table>
<thead>
<tr>
<th>Name of Committee Member</th>
<th>Rank (Asst Prof, Assoc Prof, Prof)</th>
<th>School/College &amp; Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. _____, Advisor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ No Change</td>
<td>□ NEW advisor, replaced : _____</td>
<td></td>
</tr>
<tr>
<td>2. _____</td>
<td>□ No Change</td>
<td>□ NEW member, replaced : ____</td>
</tr>
<tr>
<td>3. _____</td>
<td>□ No Change</td>
<td>□ NEW member, replaced : ____</td>
</tr>
<tr>
<td>4. _____</td>
<td>□ No Change</td>
<td>□ NEW member, replaced : ____</td>
</tr>
<tr>
<td>5. _____</td>
<td>□ No Change</td>
<td>□ NEW member, replaced : ____</td>
</tr>
</tbody>
</table>

Additional Members – Not Required

□ No Change □ NEW member, replaced : _____

Attached to this form is a page that:
1. Briefly describes students research project,
2. Circumstances that lead to a change in committee members,
3. Identify any members being removed and justify their deletion,
4. Identifies the role and special expertise of each NEW member of Committee.
STUDENT NAME: __

BRIEF DESCRIPTION OF RESEARCH PROJECT

CIRCUMSTANCES THAT LEAD TO CHANGE IN COMMITTEE MEMBERS

IDENTIFY MEMBERS BEING **REMOVED** and JUSTIFICATION FOR DELETION

1. __,  
2. __,  
3. __,  
4. __,  
5. __,

ROLE and/or SPECIAL EXPERTISE TO JUSTIFY **NEW** COMMITTEE MEMBERS

1. __,  
2. __,  
3. __,  
4. __,  
5. __,

________________________________________  ______________________________  _____________________________
Signature of Student                       Date of Meeting                       Signature of Major Professor

_______________________________  _________________________________
Signature of GAC Chair                   Date Approval                           Date Presented to GAC