



## Committee Member(s) Being Added to Committee

(If no one is joining your Committee leave this blank)

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Name	Dept./School	Signature
ISU Graduate Faculty:	<input type="checkbox"/> full member <input type="checkbox"/> associated member	<input type="checkbox"/> not a member

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### University regulations for committee

All members of the ISU Graduate Faculty

At least one chair and a majority of all members hold full membership on ISU Graduate Faculty

Majority of members come from the student's department/school

If the committee members proposed above do not meet all requirements, listed on the instruction page of this form, indicate exception/s requested.

- chair not a full member
- majority not full members of ISU Graduate Faculty
- majority not from within the department/school
- includes a member not on the ISU graduate faculty (attach copy of outside member's vita)

Brief rationale for each exception sought:

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## Approvals for the Changes to This Committee

Department Chair/School Director or designee should not sign this form until IRB/IACUC/IBC approval has been obtained, if applicable.

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Department Chair/School Director Name, Printed	Signature	Date
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Thesis/Dissertation Chair Name, Printed	Signature	Date
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Student Name, Printed	Signature	Date
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### Graduate School

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Signature	Date
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