

**COMMITTEE MEMBERS**

I have agreed to serve on the following student's committee  
(recitals, thesis, and examinations)

Student's name: \_\_\_\_\_

Major area: \_\_\_\_\_

Member of MM or DMA or Ph.D Major Committee:  
(please circle)

\_\_\_\_\_  
Signature/Chair print

\_\_\_\_\_  
Signature print

\_\_\_\_\_  
Signature print

Minor area: \_\_\_\_\_

Member of the minor committee: (DMA/Ph.D only)

\_\_\_\_\_  
Signature print

\_\_\_\_\_  
Signature print

Please submit the completed form to the Office of Academic Student Services, during the first semester of classes.

\_\_\_\_\_  
Approved by: Director of Graduate Studies Date