

Conflict Analysis and Resolution Program

Request to Change Dissertation Committee Chair/Member

Name: _____ NSU ID #: _____ Date: _____

CHANGE COMMITTEE CHAIR

Previous Committee Chair: _____ Signature: _____

New Committee Chair: _____ Signature: _____

*It is the responsibility of the new Chair to notify committee members.

CHANGE COMMITTEE MEMBER

Current Committee Chair: _____ Signature: _____

Current Committee Member: _____ Signature: _____

New Committee Member: _____ Signature: _____

ADD COMMITTEE MEMBER

Current Committee Chair: _____ Signature: _____

New Committee Member: _____ Signature: _____

Student Signature: _____ Date: _____

Program Director Approval: _____ Date: _____

Cc: Student
Dissertation Committee Members
Program Manager/Student File