

Request Form for a Change in Dissertation Committee

Student Name: _____

Specialization: P-12 Leadership Community College Leadership

Cohort Year: _____ **Date:** _____

Upon request by the candidate and/or Dissertation Committee Chair, and upon approval of the Program Director, the Dissertation Committee Chair or a Dissertation Committee Member may be changed.

Replacement:

Chair	Printed Name	Signature	Department
Initial			
Replacement			

Approval: Approved Denied

Program Director Signature: _____ **Date:** _____

Comments: _____

Replacement:

Member	Printed Name	Signature	Department or workplace
Initial			
Replacement			

Recommended by the Dissertation Chair: Yes No

Dissertation Chair Signature: _____ **Date** _____

Comments: _____

Approved by Program Director: Yes No

Program Director Signature: _____ **Date:** _____

Comments: _____