

## CHANGES TO MASTER'S THESIS OR DOCTORAL COMMITTEE

*A copy of the processed form will be sent via email to the student and department*

**Joint Doctoral Committee Regulations:** A minimum of two tenure-track faculty in student's UCSB major department and two tenure-track faculty in major department at partner institution.

Name: \_\_\_\_\_ UCSB Perm: \_\_\_\_\_ Joint ID: \_\_\_\_\_

UCSB UMail: \_\_\_\_\_ Major: \_\_\_\_\_ Joint University: 'Sacramento San Diego

*Student's Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

**COMPLETE ALL REQUESTED INFORMATION, noting the following:**

- If UC emerita/us, include month and year of retirement or *if recall professor, include payroll title code and contract dates*
- Identify member type modification (e.g., Chair to Member, Chair to Co-Chair, etc.)

Action Add, Modify, Remove	Member Type/Modification	Member Information Name, Title, Dept. and/or Institution	Member Signature
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**GRADUATE PROGRAM APPROVALS**

**Our signatures below indicate that we:**

- Acknowledge and approve these changes
- Have verified that no conflict of interest exists involving new committee members. *In the event a conflict of interest does exist due to a faculty member having a financial interest (including employment or a consulting arrangement) in a private entity with which the above graduate student is involved, a new [Conflict of Interest Form](#) is included with this form.*

JDP Director, Affiliated Institute: \_\_\_\_\_  
*Type or print name* *Signature* *Date*

JDP Director, UCSB: \_\_\_\_\_  
*Type or print name* *Signature* *Date*

Department Chair, UCSB: \_\_\_\_\_  
*Type or print name* *Signature* *Date*

**GRADUATE DIVISION**

Dean, Affiliated Institute: \_\_\_\_\_  
*Signature* *Date*

Dean, UCSB: \_\_\_\_\_  
*Signature* *Date*