



Graduate Committee

College of Agriculture and Natural Resources

Appointing Committee Changing Committee

General Information:

Name: _____ Department: _____
 PID: _____ Major: _____
 E-mail: _____ Degree: Plan A Plan B Other: _____

Member	Department	Role			MSU Status		If changing	
		Major Professor	Committee Chair	Member	Internal	External	Add	Remove
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Signatures:

_____ Date _____ Major Professor _____ Date _____
 Graduate Program Coordinator Date _____ Associate Dean _____ Date _____