



College of Arts, Humanities, and Social Sciences (CAHSS)

Department of Family Therapy
Request to Change Dissertation Committee Chair/Member

Date: \_\_\_\_\_ NSU ID#: \_\_\_\_\_

I, \_\_\_\_\_, request permission to make changes to my dissertation chair/committee member.

Reason for change: \_\_\_\_\_

Current Committee Chair Name: \_\_\_\_\_

Current Committee Chair's Signature: \_\_\_\_\_

New Committee Chair Name: \_\_\_\_\_

New Committee Chair's Signature: \_\_\_\_\_

Committee Member Name: \_\_\_\_\_

Committee Member's Signature: \_\_\_\_\_

Committee Member Name: \_\_\_\_\_

Committee Member's Signature: \_\_\_\_\_

(Each of the above faculty members has agreed to the changes to my committee.)

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

Approved: \_\_\_\_\_ Date: \_\_\_\_\_
Department Chair

Approved: \_\_\_\_\_ Date: \_\_\_\_\_
Honggang Yang, Ph.D.
Dean

Dissertation Committee Members
Program Coordinator/Student File