

Form C5-CONSTITUTION OF THE STUDENT COMMITTEE

Name _____ Student's number _____

Application date _____ Degree: Master _____ Doctoral _____

Interest area/specialty in the graduate program: _____

Proposal preliminary subject / thesis / dissertation:

Proposal composition for the student Committee:

_____ Director of proposal/thesis	_____ Signature	_____ Department
_____ Name of committee member	_____ Signature	_____ Department
_____ Name of committee member	_____ Signature	_____ Department
_____ Name of committee member	_____ Signature	_____ Department
_____ Name of committee member	_____ Signature	_____ Department

Student's Signature _____ Date

Composition approved by:

Graduate Program Coordinator _____ Date

The signature of the committee members is evidence of their disposition to be included in the student committee.