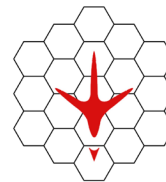




University of Puerto Rico  
 Río Piedras Campus  
 College of Natural Sciences  
 Department of Chemistry  
 17 Ave. Universidad STE 1701  
 San Juan PR 00925-2537



**Chemistry Graduate Program**  
**Form C6- Change in Constitution of the Student Committee**

\_\_\_\_\_  
 Student Name

\_\_\_\_\_  
 Student Number

Classification:  M.S.     Ph.D.

Change requested and justificaiton: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Proposal composition for the thesis committee-**

*Signing this form indicates that you commit to serve on the student's thesis committee for all requirements.*

_____ Committee Director	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department
_____ Committee Member	_____ Signature	_____ Department

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of the Chemistry Graduate Program Coordinator

\_\_\_\_\_  
 Date