Master’s Student – Committee Membership/Notice of Change

**Complete Part 1 of this form, print and sign it and forward it to the graduate coordinator for your program.**

# Part 1: Student Details

To be completed by the student.

First name:

Last name:

WLU ID:

WLU Email:      @mylaurier.ca

Program (e.g. MSc Geography):

# Part 2: Committee Details

To be completed by the student.

Provide the names of your **original** thesis advisory committee (TAC) members:

Advisor First name:       Last name:

Committee member 1 First name:       Last name:

Committee member 2 First name:       Last name:
(if applicable)

Committee member 3 First name:       Last name:
(if applicable)

## Notice of Change

Provide the names of your **new** thesis advisory committee (TAC) members:

Advisor First name:       Last name:

Committee member 1 First name:       Last name:

Committee member 2 First name:       Last name:

Committee member 3 First name:       Last name:

# Part 3: Required Signatures

To be completed by the student and graduate coordinator.

Student’s signature:       Date:

By signing below, the Graduate Coordinator verifies that each member of the committee (listed above) has Graduate Faculty Status and is thereby eligible to serve on this committee.

Graduate coordinator’s signature:       Date:

# Notice of Collection of Private Information

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