Office of Graduate Studies Graduate Affairs

University of California, San Diego San Diego State University

La Jolla, CA 92093 San Diego, CA 92182

**Joint Doctoral Program**

**CHANGE IN MEMBERSHIP OF THE DOCTORAL DISSERTATION COMMITTEE**

**FOR THE DEGREE OF DOCTOR OF PHILOSOPHY IN**

***LANGUAGE AND COMMUNICATIVE DISORDERS***

NAME: **Last Name** **First Name** **Middle Initial** **Student ID #** **UCSD Student #**

 *Last First Middle Student ID # UCSD Student #*

ADDRESS: **Number and Street** **City** **State** **Zip** **Telephone #**

 *Number and Street City State Zip Telephone #*

To: Dean, Office of Graduate Studies, UCSD / Dean, Graduate Affairs, SDSU

The student named has established eligibility for the nomination of a dissertation committee.

Proposed title of dissertation: **Dissertation Title**

The following persons, who have agreed to serve, are nominated as the Doctoral Committee:

 **Name and Academic Title** *(print or type)* **Signature Department Institution**

 **­­**

Chair

 **­­**

Co-Chair *(if applicable)*

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**Approved SDSU: Approved UCSD:**

*Graduate Adviser Department/Group Chair*

*Date Date*

*Dean, Graduate Affairs, SDSU Dean, Office of Graduate Studies, UCSD*

*Date Date*

Distribution: ✓ Dean, Office of Graduate Studies, UCSD ✓ Dean, Graduate Affairs, SDSU

 ✓ Department/Group Chair, UCSD ✓ Graduate Adviser, SDSU

* Student