

Frontiers Thesis Committee Formation Form

Date_____

_____ has had an initial meeting with his/her proposed thesis committee.

Please check box if this is a revision to the proposed thesis committee

Proposed Committee:

Thesis advisor or co-advisors:

_____ name printed _____ name signed _____ Title/Department

_____ name printed _____ name signed _____ Title/Department

Additional Committee Members:

_____ name printed _____ name signed _____ Title/Department

_____ name printed _____ name signed _____ Title/Department

_____ name printed _____ name signed _____ Title/Department

Note: A Frontiers master's thesis committee consists of the student's primary advisor plus two additional members, one of whom must be from EEB.

"title" = Professor, Associate Professor, Assistant Professor, etc.