

# Reconstitution of the Doctoral Committee and/or Change in Final Oral Examination Requirement

Return to: Academic Services, 1255 Murphy Hall, Mail Code: 142801.

Student Name (last, first, middle) \_\_\_\_\_

University ID # \_\_\_\_\_ Email \_\_\_\_\_

Major \_\_\_\_\_ Degree Objective \_\_\_\_\_

\* indicates an interdepartmental program

This petition is to:  Change committee members  Change the final oral examination requirement

Has the student advanced to candidacy?  Yes  No

As indicated by the signatures below, the committee agrees that the Final Oral Examination is  required  not required

To be completed by student				To be completed by committee member
Title	Name (please print)	Department	New?	Signature
Chair/Co-Chair			<input type="checkbox"/>	
Co-Chair			<input type="checkbox"/>	
Committee Member			<input type="checkbox"/>	
Committee Member			<input type="checkbox"/>	
Committee Member			<input type="checkbox"/>	
Committee Member			<input type="checkbox"/>	
Committee Member			<input type="checkbox"/>	

\* Effective Fall 2016, committees that are appointed or reconstituted require all members to be certifying.

Email address(es) of member(s) who does not hold a UCLA appointment:

Faculty Name \_\_\_\_\_ Faculty E-mail \_\_\_\_\_

Faculty Name \_\_\_\_\_ Faculty E-mail \_\_\_\_\_

Please **remove** the following professors from the Doctoral Committee:  
Leave blank if there are no deletions. Please indicate in the signature area if the professor is no longer at UCLA. Signatures from faculty who no longer hold an appointment at UCLA are not required. If you are changing three or more members of your committee, please include a memo from the Department Chair.

Name (please print)	Signature

Signature of Department Chair or Authorized Faculty Graduate Adviser

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_