

George Mason University
School of Public Policy
Change of Dissertation Committee Member

Student's Name: _____ Date: _____

Tentative Title: _____

	Name	Signature	Date
Chair	_____	_____	_____
Leaving Committee	_____	_____	_____
Joining Committee	_____	_____	_____
Leaving Committee	_____	_____	_____
Joining Committee	_____	_____	_____

Approved By:

Assistant Dean
Program Management _____

Ph.D. Program Director _____

SPP Dean _____

Please return this form to SPP Ph.D. Student Services, Founders Hall 5th Floor, MS 3B1.

SPP Ph.D. Form 6 (optional)