



## DOCTORAL PROGRAMS

### REQUEST FOR CHANGE OF DISSERTATION COMMITTEE Return form to Wharton Doctoral Programs Office 430 SHDH

Name: \_\_\_\_\_ Penn ID: \_\_\_\_\_

E-mail: \_\_\_\_\_ Department: \_\_\_\_\_

Reason for request:

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#### **Add Member(s):**

Name/Signature: \_\_\_\_\_ Department: \_\_\_\_\_

Name/Signature: \_\_\_\_\_ Department: \_\_\_\_\_

#### **Remove Member(s):**

Name/Signature: \_\_\_\_\_ Department: \_\_\_\_\_

Name/Signature: \_\_\_\_\_ Department: \_\_\_\_\_

#### **Change Member Role(s):**

Name/Signature: \_\_\_\_\_ Department: \_\_\_\_\_

*Current Role* (Circle one): Supervisor, Chair, Committee Member

*Change to* (Circle one): Supervisor, Chair, Committee Member

Name/Signature: \_\_\_\_\_ Department: \_\_\_\_\_

*Current Role* (Circle one): Supervisor, Chair, Committee Member

*Change to* (Circle one): Supervisor, Chair, Committee Member

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Supervisor Recommendation (Circle one): Approve / Deny

Name of Supervisor	Signature	Date
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Vice Dean Decision (Circle one): Approve / Deny

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Signature of Doctoral Programs Vice Dean/ Date