

CALIFORNIA INSTITUTE OF TECHNOLOGY
Division of Chemistry and Chemical Engineering

Ph.D. COMMITTEE APPROVAL FORM

(CANDIDATE'S NAME)

I have consulted with my advisor(s) and request that the composition of my Ph.D. Examination Committee be as follows:

(CHAIRMAN)

(RESEARCH ADVISOR)

(3rd MEMBER)

1st CHOICE (4th MEMBER)

2nd CHOICE (4th MEMBER)

3rd CHOICE (4th MEMBER)

(ADDITIONAL MEMBER, IF ANY)

Date: _____

Signed: _____
(RESEARCH ADVISOR)



RETURN FORM TO GRADUATE RECORDS SECRETARY (ROOM 161 CRELLIN)



Date: _____

Approved: _____
(GSC CHAIRMAN)