THE UNIVERSITY OF UTAH
DEPARTMENT OF MECHANICAL ENGINEERING

M.S. REQUEST FOR SUPERVISORY COMMITTEE

This form is to be filled in by the student and submitted to the ME Graduate Office (1568 MEK).

Name: _____
Last First

Salt Lake City Address: _____
Street City State Zip

UID: _____ Phone: _____

STUDENT'S SUPERVISORY COMMITTEE:
The committee, consisting of a chair plus two faculty members is to be nominated by the Department Chair or the Director of Graduate Studies according to departmental policy. Committee appointments are not final until approved by the Dean of The Graduate School.
Additional rules regarding forming your committee can be found at
http://gradschool.utah.edu/graduate-catalog/degree-requirements/

Fill in committee member names and have members sign

COMMITTEE:

Chair _____ Department_____

Member _____ Department_____

Member _____ Department_____

The above committee members have been nominated to serve on the student's supervisory committee.

Action by (Signature)_____of the Department of Mechanical Engineering
Dept. Chair or Director of Graduate Studies

Date:_____

THIS FORM IS DUE BY THE END OF YOUR FIRST YEAR IN THE GRADUATE PROGRAM