

FACULTY AGREEMENT TO SERVE ON MASTER'S DEGREE SUPERVISORY COMMITTEE

Student Name:		Date:	
Select one: Scholarly Project	Thesis		
Academic Adviser:	-	Track:	
Adviser Signature:		Date:	
I hereby agree to serve as a chairperson/member of	a supervisory committe	ee for the aforementioned s	student.
Chairperson:		Date:	
Signature:			
The Supervisory Committee chair will assume academic ac	lvising duties for this stud	ent. Yes	No
Member:		Date:	
Signature:			
Member:		Date:	
Signature:			
Research Topic:			
This form must be submitted BEFORE you begin work on your thesis or project. It must be submitted with a signed Use of Human and Animal Subjects in Theses and Dissertations form and a signed Initial Project Plan & Final Report (if necessary).			
IMPORTANT: The Chair and at least one-half of the total membership must be members of the UW Graduate Faculty. Visit <u>https://grad.uw.edu/for-faculty-and-staff/faculty-locator/</u> for more information.			