

**THE UNIVERSITY OF ALABAMA
DEPARTMENT OF BIOLOGICAL SCIENCES
APPOINTMENT OF MASTER'S PLAN II COMMITTEE**

STUDENT NAME: _____

DATE: _____

EMAIL: _____

CWID: _____

ADVISORY COMMITTEE:

The Advisory Committee must consist of three Biological Sciences faculty members. The student's M.S. advisor serves as the Chairperson of the committee. Although not a requirement, the committee can also include one outside faculty member. If this person is from outside the University, a memo justifying the appointment and a copy of the member's current *curriculum vitae* must be submitted to the Graduate Committee for approval.

COMMITTEE MEMBERS (printed names)	DEPARTMENT	INITIALS*
CHAIRPERSON: _____	_____	_____
MEMBER: _____	_____	_____
MEMBER: _____	_____	_____
OUTSIDE MEMBER: (Optional) _____	_____	_____

DEPARTMENT APPROVAL:

DEPARTMENT CHAIR: _____
(Signature)

DATE: _____

GRADUATE PROGRAM DIRECTOR: _____
(Signature)

DATE: _____

* By providing initials, the members agree to serve on committee.