

Supervisory Committee Form

Student instructions: confirm with each facu	ılty member on this form	that they agree to be on ye	our supervisory committee
for the MA program in Asian Studies, includin	ng duties involving thesis/	project non-thesis guidanc	e and thesis defense.
Submit this form to the Director of Graduate internal record keeping before the end of you			
Student Name:		Unid:	
Student Signature:		Date:	
Faculty Name	Signature		Date
(Chair)			
(Optional)			
Approved by Director of Graduate	Studies:		
Signature:		Date:	