



Department of
Anthropology

Department of Anthropology

MEMORANDUM

To: Graduate Program Coordinator

From:

Date:

RE: Forming a Committee

The following faculty members have agreed to serve on my committee.

_____	Print Committee Chair Name
_____	<i>Committee Chair Signature</i>
_____	Print Second Member Name
_____	<i>Second Member Signature</i>
_____	Print Third Member Name
_____	<i>Third Member Signature</i>
_____	Print Fourth Member Name, or N/A if not applicable
_____	<i>Fourth Member Signature, or N/A if not applicable</i>

The following person has agreed to serve as my Internship Preceptor:

_____	Print Preceptor Name (N/A if not applicable)
_____	<i>Preceptor Signature</i>