**INSTRUCTIONS:** ***All*** *Committee Members need to sign this form. Please give completed form to Katherine Totty (EPS 110/935-5603/tottykm@levee.wustl.edu).*

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| **Student Name:** |  | **Semester/Year Enrolled:**  |  |
| **Student ID #:** |  |  |  |
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| **Name (*Committee Chair*)** |  | **Signature** |  | **Date** |
| **Comments:** |
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| **Name (*Committee Member*)** |  | **Signature** |  | **Date** |
| **Comments:** |
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| **Comments:** |
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