**Application Form for the change**

**of Thesis review members**

**1. Applicant for thesis review**

|  |  |  |  |
| --- | --- | --- | --- |
| Department |  | Course |  |
| Student ID |  | Name |  |

**2. Contents**

|  |  |  |
| --- | --- | --- |
| Classification | Before Change | After Change |
| Position | Name | Position | Name |
| Chairman of the screening committee |  |  |  |  |
| Thesis Review members |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Reason for the Change |  |

 (year) (month) (day)

Academic Advisor (Signature)