## Organization Information & Learning Sciences University of New Mexico

[Student: Please use this form to secure your committee members' signatures.]

#### **Student Information**

Name:	
Address:	
Phone:	
Fax:	
Email(s):	

### **Thesis Information**

Committee Chair:	
Topic of Research:	
Preliminary	
Title of Thesis:	

## **Committee Signatures**

Committee Chair:	
	Date:
Committee Member 1:	
	Date:
Committee Member 2:	
	Date:

# **Thesis Committee Submission**

Filed in	
OLIT Office:	Date: