





UNIVERSITY  
of HAWAI'I®  
MĀNOA

**Petition to Revise Thesis Committee**

**Part I. To be completed by the student**

Name \_\_\_\_\_ UH ID No. \_\_\_\_\_  
LAST, FIRST, M.I.

Graduate Program \_\_\_\_\_ Degree Objective \_\_\_\_\_  
INCLUDE SPECIALIZATION IF APPLICABLE.

Reason for Revising Committee: \_\_\_\_\_

I certify that I have read and understand the policies and instructions for this form.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

**Obtain signatures from members of the current and revised committees:**

CURRENT COMMITTEE : Name (Type or Print)	Signature	Date
Chair		
Member		
Member		
Member		
REVISED COMMITTEE : Name (Type or Print)	Signature	Date
Chair		
Member		
Member		
Member		

**Part II. To be completed by the graduate chair**

I certify that this petition is in compliance with the policies and instructions for this form.

Signature of Graduate Chair \_\_\_\_\_ Date \_\_\_\_\_

**GRADUATE DIVISION ACTION**

Approved  Not Approved By \_\_\_\_\_ Date \_\_\_\_\_

Remarks:

**C: Graduate Program**