Florida Atlantic University

School of Communication and Multimedia Studies

Master of Arts – Communication Studies

### COMMITTEE APPOINTMENT FORM (THESIS OR NON-THESIS TRACK)

#### Please type or print all information, except where noted for signature (electronic signatures are allowed).

*Once Part I and Part II are complete, please email to scharbo1@fau.edu*

PART I. STUDENT AND DEGREE INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Name |       | Z# |  |
| Street Address |       | City, State, Zip |       |
| E-mail Address |       | Phone |       |
| Department | School of Communication and Multimedia Studies | **Thesis Track or****Non-Thesis Track?** |       |
| **Entered Degree****Program***(e.g. Fall 2018)* |       | Degree Sought | MA – Communication Studies |

PART II. COMMITTEE INFORMATION

**Thesis Committee: Non-Thesis Committee:**

3 committee members required 3 committee members required

At least 2 SCMS Faculty required At least 2 SCMS Faculty required

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Full Name | **Signature of Approval**All members must sign for themselves. | **Dept.****(abbreviate)** | **Date Signed** |
|  **Advisor** |       |  | Must be SCMS |  |
| Member |       |  |       |  |
| Member |       |  |       |  |

# PART III. APPROVAL

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full Name | **Signature of Approval** | **Date Signed** |
| **MA Director/****Dept. Chairperson** |       |  |  |