



Proposed Master Thesis Advisory Committee
Center for Clinical and Translational Science Activities

Student Information

Name <i>(Last, First, Middle)</i>	Person ID
Track	Master Start Date <i>(mm-dd-yyyy)</i>
Thesis Title	

Instructions

- It is the student’s responsibility to ask each faculty member if they are willing to serve on the committee prior to submitting this form.
- The committee must consist of four members, one of whom is the student’s advisor, who serves as chair of the committee. Any additional members beyond four will be ex-officio and will not vote at the defense.
- Voting members must be present at the final oral exam. Any absent voting member is considered a dissenting vote.
- All committee members must have or be eligible for graduate faculty privileges. No more than two members may have teaching/examining level privileges.
- No member other than a student’s mentor may be a co-investigator or co-author for the research project. Exceptions include a statistician or epidemiologist.
- The Master’s Thesis Advisory Committee must meet with the student within 3 months following the research proposal approval and every 3 to 6 months thereafter.
- You will be notified when this committee has been reviewed and approved by the CCaTS Postdoctoral Program Executive Committee.
- **Return completed form as part of your research proposal packet to ccatseducprog@mayo.edu.**

Committee Members

Chair or Mentor <i>(First, Middle, Last)</i>	Member <i>(First, Middle, Last)</i>
Member <i>(First, Middle, Last)</i>	Ex-Officio <i>(First, Middle, Last)</i>
Member <i>(First, Middle, Last)</i>	Ex-Officio <i>(First, Middle, Last)</i>

Signatures

Student Signature* (required) ▶	Date <i>(mm-dd-yyyy)</i>
Mentor Signature* (required) ▶	Date <i>(mm-dd-yyyy)</i>

Office Use Only

Notes

**Digital signatures are acceptable.*