



DEPARTMENT OF
GEOGRAPHY
College of Arts and Sciences

Plan of Study Committee Meeting

Student Name (first and last name): _____

CWID: _____

Check One: M.S. ☐ Ph.D. ☐

This form confirms that a Plan of Study Committee Meeting to discuss and approve coursework and research direction was held on:

Date: _____

Chair: _____

Advisor (if different from Chair): _____

Member 1: _____

Member 2: _____

Outside Member (if Ph.D. student): _____

Student: _____