

**GEOLOGICAL SCIENCES COMMITTEE MEETING RECORD**

Student's Name _____			Degree plan (circle one): Plan I (Thesis) Master's, Plan II (Course Work) Master's, PhD				
Committee Members (print clearly)	Role* (circle one)	Dept or Affiliation† (print clearly)	Year 1 (1st Sem.) Signatures Date:	Year 2 Signatures Date:	Year 3 Signatures Date:	Year 4 Signatures Date:	Year 5 Signatures Date:
	Main Advisor / Chair / Member						
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	Main Advisor / Chair / Member						
			<b>Fill out 1st-Semester Meeting form</b>	Recommended coursework, research goals, comments:	Recommended coursework, research goals, comments:	Recommended coursework, research goals, comments:	Recommended coursework, research goals, comments:
Date received by GPA							

*\*Roles: Chair should be identified by year 2. Chair must be Regular GEOL faculty, and cannot be a main advisor.*

*†Dept or Affiliation: Give academic or research home for CU members, or organization for non-CU members.*

*Use extra lines if Committee membership changes*

**Copies of this form must be provided to the Graduate Program Assistant, the student, and the main advisor after each meeting.**