

Massachusetts Institute of Technology

77 Massachusetts Avenue Building 54-918 Cambridge, MA 02139-4307

Education Office 617-253-3380 eaps-ed-office@mit.edu

## **SM Thesis Committee Selection and Proposal Form**

Complete and return this form to the Education	Office.
Candidate Name:	Date:
Thesis Tentative Title:	
COMPOSITION OF THESIS EXAMINATION O	COMMITTEE
This is: NewAmended composition for	or the committee.
For a new committee, submit this form by the A Masters, Year Two for Traditional Masters). You change the membership of your thesis commit	
Committee Member *	Thesis Advisor
Committee Member *	Thesis Chair
Committee Member *	
Committee Member	(Optional)
*required EAPS members of the committee. The chafaculty.	air and the majority of the committee should be EAPS
If your optional committee member is external preferred contact email of member outside of E	to MIT, please provide their Title, affiliation, and EAPS/MIT:
Please include a brief abstract (if you need t to do so).	o attach a separate word doc, please feel free
Thesis Advisor Signature:	



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