



UNIVERSITY OF ARKANSAS AT PINE BLUFF
Department of Aquaculture and Fisheries

Formation of Graduate Advisory Committee

The undersigned have agreed on _____ / / _____ to serve as a committee member on
(Date)

the Graduate Advisory Committee for _____
(Print Student's Name)

Thesis/Dissertation Committee

(Print name)

(Signature)

(Committee chair)

(Committee member)

(Committee member)

(Committee member)

(Committee member)

(Committee member)

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