

University Registrar Use Only	
Date Received: _____	Received by: _____
Date Processed: _____	Processed by: _____

Graduate Thesis Committee

Submission of this form, along with the Thesis Proposal Approval Form, initiates enrollment in Thesis 1. Students are encouraged to check with their department regarding deadlines.

LAST NAME: _____ FIRST NAME: _____

STUDENT UID: _____ EMAIL: _____@floridapoly.edu

STUDENT SIGNATURE: _____ DATE: _____

Step 1: Program Information

MASTER OF SCIENCE IN:

<input type="checkbox"/> Computer Science	<input type="checkbox"/> Electrical and Computer Engineering
<input type="checkbox"/> Data Science	<input type="checkbox"/> Mechanical Engineering

Step 2: Identify Committee Members & Approval Signatures

The Thesis Committee must include at least three full-time faculty at Florida Poly (not adjunct, visiting, nor courtesy), comprised of:

- A Thesis Advisor who is an expert in the subject, within the degree-granting department
- Two additional full-time faculty members, of whom:
 - At least one must come from outside the student’s department and have relevant expertise

Note on optional members: Industry partners or outside faculty may serve as **additional** members beyond the required three full-time faculty. The committee may not exceed 5 members.

(per [FPU-5.0123AP](#)).

	PRINT NAME	DEPT	SIGNATURE	DATE
THESIS ADVISOR:				
<i>Advisor Dept Chair</i>				
MEMBER:				
<i>Member Dept Chair</i>				
MEMBER:				
<i>Member Dept Chair</i>				
OPTIONAL MEMBERS				
CO-ADVISOR:				
<i>Co-Advisor Dept Chair</i>				
Add'l MEMBER:				
<i>Member Dept Chair</i>				
EXTERNAL MEMBER:		-		
<i>Company Name</i>		-	-	-

Department Codes: Computer Science (CS), Data Science & Business Analytics (DSBA), Electrical & Computer Engineering (ECE), Mechanical Engineering (ME), Mathematics (MA), Natural Sciences (NS)