## Access this form and other Graduate School Forms though the RAMweb portal (or click here)



## Applicants and Current Students

RAMweb provides online access to application status, registration, financial information, personal records, jobs, and more for applicants, new, and current students.

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I forgot my Username and/or Password
Help and Contact Information

## SAMPLE FORM BELOW



				Signature	Date
	Comments				
V		n · ·			
	Committee Member	Puecision			
				Signature	
	Commonto			orginature	Date
	Comments			- 	
No Change	Outside Member De	atails			
INO Change		tside Member) Webb Colleen email@colostate.edu			
	Outside Member De	ecision			
	Please Select		~		
				Signature	Date
	Comments				
If you have more than f	our committee mem	bers that are not listed in this section, please enter faculty name	e(s) tha	t you would like to remove fro	m your committee in the box below.
		^			
		<b>Y</b>			
Add Committee Mei	mber(s)				
Complete this section fo	r the following types	of requests:			
•					
<ul> <li>Swap committee of Add committee me</li> </ul>		by removing them from the appropriate section and adding	them be	elow	
7 ad committee m	citiber(3)				
Select Member Type		Select Committee Member			
Committee Member	V	Aster, Rick (Geosciences), 888998000			<u> </u>
	V				V
	V				V
If you are adding more	than three different	committee members, please enter faculty name, department, a	nd wha	t role they will serve in the box	below:
			4		
		·			
0 . 0	A 1 1				
Changes to Co-	Advisor				
Complete this section fo	r the following types	of requests:			
Change co-adviso     Remove a co-advi		committee member) by removing them below then adding the	em in t	ne appropriate section	
<ul> <li>Add a co-advisor</li> </ul>					
<ul> <li>Signatures are rec</li> </ul>	quired for co-advisor	changes			
Remove Current Co-Ad	tvisor?	Current Co-Advisor			
No	V				
,					
Add New Co-Advisor	IV.				
,	oon he listed inlesse	review if you have a go advisor and if you wish to remove then	90 00 VA	ur aurrant aa	
advisor.	can be listed, please	review if you have a co-advisor and if you wish to remove then	n as yo	ur current co-	
Changes to Adv	/icor				
Changes to Auv	/1501				
Complete this section fo	r the following types	of requests:			
Any change to cur	rent advisor an advis	sor is required for all programs			
• Any change to cun	rent auvisor, an auvis	sor is required for all programs			
	g in the Advisor role	is required. Do you want to <b>change</b> your current faculty advisor	r to a ne	ew faculty member? Add your	advisor by marking 'Yes' and then selecting a
new advisor below.  Yes					
⊚ No					
Your new advisor will re	place your current ac	lvisor listed below			
Sanford, William (Advi-	sor) William Sanford	email@colostate.edu			
•		-			
Advisor Section - Re	eview and Suhmi	•			
Advisor occilon - No	cview and cabili	•			
Orimant - dut-			1 - 12 - 2	- #- 10.1-25 - 12 · · · · ·	Adam danakan tahun menerakan digi
member changes.	ase review all chan	ges, sign, and complete the form by scrolling to the bottom and	d click o	n the 'Submit Form' button. Ad	ivisor signature is <b>required</b> for any committee
on.sor ondinges.					
Current Advisor Se	ction				

Current Advisor Decision If you do not approve, the form will not proceed to the Graduate School and the student will need to submit a new form.
33832226
Signature Date
Advisor Comments  NOTE: Comments will be visible to the student and all form participants.
○
* For Students: Sign in the field below and submit the form using the button at the bottom of the page.
Please contact the Graduate School with questions. Thank you.
Signature Date
Program Coordinator Section
Please review the student's committee and details and provide comments if necessary. Complete the form by scrolling to the bottom and click on the 'Submit Form' button.  Program Coordinator First Name Program Coordinator Last Name Program Coordinator Email
Program Coordinator First Name     Program Coordinator Last Name     Program Coordinator Email       Patti     Uman
Form reviewed by coordinator? If you select 'No', the form will not proceed and the student will need to submit a new form.
Program Coordinator Comments NOTE: Comments will be visible to the student and all form participants.
TO IE. COMMENTS WIN SO VISIBLE TO THE STANDARD OF THE STANDARD
Signature Date
Signature Date
Department Head Section
Department Head Section  Please review the student's request to change committee members. Complete the form by scrolling to the bottom and click on the 'Submit Form' button.  Department Head First Name  Department Head Last Name  Department Head Email
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